

Military Academy Nominations Form

PRIVACY ACT STATEMENT: Submission of the requested information constitutes authorization to release it to Congressman Stutzman, his academy advisory committee, and the academy admissions offices.

* required entries

Please indicate the academy(ies) of your choice.

Air Force *

Merchant Marine *

Army *

Navy *

I am applying for the class entering the year : *

I. PERSONAL INFORMATION:

Full Name : *

E-Mail Address : *

Permanent Address : *

Zip : *

Mailing Address :

Telephone : (home)* (work) (relative)

Place of Birth :*

Height : Weight : Gender :*

Mother's Name:* Occupation:

Father's Name:* Occupation:

Is your uncorrected visual acuity in each eye at least 20/20? *

If No, is your corrected visual acuity in each eye at least 20/20?

What is the primary language spoken in your home? *

Are you on active duty, or on reserve in the armed forces? *

If Yes, which service?

Any Dependents?

Marital Status?

Are you a U.S. citizen? *

If NO [contact my office](#) for your first choice academy

II. EDUCATIONAL HISTORY:

High School :*

Date of High School Graduation:*

Mailing Address :*

Telephone :*

GPA :

Class Rank: (ie. 5/1000)

PSAT :

Date :

SAT :

Date :

2nd SAT :

Date 2nd :

ACT :

Date :

ACT 2nd :

Date 2nd :

Principal :

Counselor :

College (if applicable) :

Mailing Address :

Years Attended :

Hours Completed :

GPA :

Telephone :

Major :

III. EXTRA CURRICULAR ACTIVITIES; HIGH SCHOOL AND/OR COLLEGE:

Activity:	Grade Level(s) During Which you participated			Office held or Any Special Recognition Award:
Band /Orchestra /				
Chorus	10	11	12	
Computer Club	10	11	12	
Debate/Speech/Drama	10	11	12	
Drill Team	10	11	12	
Girls/Boys State				
Delegate	10	11	12	
Honor Society	10	11	12	
Language Club	10	11	12	
Merit Scholarship	10	11	12	
R.O.T.C./Rifle Team	10	11	12	
School Publication	10	11	12	
School Service Club	10	11	12	
Science/Math Club	10	11	12	

Student Club	10	11	12
Other:	10	11	12

Tell us why you selected the above activities and how you benefited from them.

IV. ATHLETIC ACTIVITIES; HIGH SCHOOL AND/OR COLLEGE

Activity:	Grade Level(s) During Which you participated			Office held or Any Special Recognition Award:
Baseball/ Softball	10	11	12	
Basketball	10	11	12	
Bowling	10	11	12	
Cheerleading/ Pom Pom	10	11	12	
Football	10	11	12	
Golf	10	11	12	
Gymnastics	10	11	12	
Skiing	10	11	12	
Soccer	10	11	12	
Swimming/ Diving	10	11	12	
Tennis	10	11	12	
Track and Field	10	11	12	
Volleyball	10	11	12	
Wrestling/Judo/Boxing	10	11	12	
Other:	10	11	12	

Tell us why you selected the above activities and how you benefited from them.

V. COMMUNITY ACTIVITIES, HIGH SCHOOL AND/OR COLLEGE

Activity:	Grade Level(s) During Which you participated			Office held or Any Special Recognition Award:
Church Club	10	11	12	
Civil Air Patrol	10	11	12	
Scouting	10	11	12	
Travel Club	10	11	12	
Social Club	10	11	12	
Computer Club	10	11	12	
Volunteer Work:	10	11	12	
Other:	10	11	12	

Tell us why you selected the above activities and how you benefited from them.

VI. EMPLOYMENT HISTORY (if applicable)

Place & Address of Employment:

Job Title:

Period of Employment:

Motivation for Work:

Place & Address of Employment:

Job Title:

Period of Employment:

Motivation for Work:

VII. MANDATORY ESSAY *

In 500 words or less, explain why you wish to attend a U.S. Service Academy. Describe any special circumstance in your individual or family history which you wish to be considered, or any additional information not covered in the application above.

VIII: PLEASE READ BEFORE SIGNING*

I have read and understood the Privacy Act Statement. The answers provided are true and correct to the best of my knowledge. I understand that in addition to the above referenced information, I am also required to submit the following:

1. Personal Photo.
2. Official School Transcript, sent from school or in sealed school envelope.
3. Official SAT and/or ACT test scores received from College Board or ACT board or included on your official school transcript.
4. Three completed recommendation forms which must be sent directly to the Congressman's Fort Wayne office by the author.

If I do not submit all the necessary data by the stated deadline, I understand that I may not be given final consideration for a nomination.

Signature: You sign by entering your initials: *

Date: *