CONGRESSMAN H. MORGAN GRIFFITH



SERVICE ACADEMY APPLICATION



PERSONAL INFORMATION

NAME:	
NAME:(FIRST, MIDDLE, LAST)	
PREFERRED NAME (IF DIFFERENT THAN	ABOVE):
SEX: DATE O	F BIRTH:
SOCIAL SECURITY NUMBER:	
NINTH DISTRICT ADDRESS:	
CITY, STATE, ZIP:	
COUNTY:	
HOME TELEPHONE:	
CELL PHONE:	
EMAIL ADDRESS:	
Address (if different):	
FATHER'S NAME:	
Address (if different):	· · · · · · · · · · · · · · · · · · ·

HIGH SCHOOL INFORMATION

Name of High School:	
COUNTY:	
Address:	
CITY, STATE, ZIP:	
DATE OF GRADUATION:	
GPA/SCALE:	CLASS STANDING: OF
COLLEGE INFORMATION	ON (IF APPLICABLE)
Name of College:	
Address:	
CITY, STATE, ZIP:	
Major:	
GPA/SCALE:	CREDIT HOURS:
DATE OF GRADUATION:	· · · · · · · · · · · · · · · · · · ·
COLLEGE ENTRANCE	EEXAMINATIONS
SAT SCORES: 1 ST EXAM DATE & SCORE:	
2 ND EXAM DATE & SCORE:	
3RD EXAM DATE & SCORE:	

ACT SCORES: 1st Exam date & Score:		
2 ND EXAM DATE & SCORE:		
3RD EXAM DATE & SCORE:		
<u>ACADEMY</u>	PREFERENCE	
IF YOU DESIRE TO BE CONSIDERED FOR NOMINATION TO ONE OR MORE OF THE ACADEMIES LISTED		
BELOW, PLEASE INDICATE YOUR CHOICE NUME	RICALLY FROM 1 TO 4. USE N/A IF YOU ARE NOT	
INTERESTED IN A PARTICULAR ACADEMY. CIRC	CLE Y FOR YES AND N FOR NO IF YOU HAVE STARTED	
A PRELIMINARY APPLICATION TO THAT ACADE	MY.	
AIR FORCE	MILITARY	
YN	Y N	

MERCHANT MARINE Y N	NAVAL Y N	
***THE U.S. COAST GUARD ACADEMY DOE	S NOT REQUIRE A CONGRESSIONAL NOMINATION.	
OTHER NOMINATING SOURCES		
ARE YOU ELIGIBLE FOR A PRESIDENTIAL NOMINATION? Y N		
PLEASE CHECK ALL OTHER SERVICE ACADEMIES' NOMINATING SOURCES THAT YOU PLAN TO PURSUE:		
PRESIDENT BARACK OBAMA		
VICE PRESIDENT JOSEPH BIDENSENATOR JIM WEBB		
SENATOR MARK WARNER	JROTC	

ACKNOWLEDGEMENT: I REQUEST THAT CONGRESSMAN GRIFFITH CONSIDER MY APPLICATION FOR A CONGRESSIONAL NOMINATION TO THE UNITED STATES SERVICE ACADEMY OR ACADEMIES THAT I HAVE LISTED. I AFFIRM THAT I HAVE NEVER BEEN CONVICTED OR ARRESTED FOR VIOLATING A STATE OR FEDERAL STATUTE. I UNDERSTAND THAT THE POSTMARK DEADLINE FOR APPLICATIONS IS OCTOBER 15. IF I HAVE NOT SUBMITTED ALL OF THE REQUESTED INFORMATION BY THAT DEADLINE, I UNDERSTAND THAT MY APPLICATION MAY NOT BE GIVEN FULL CONSIDERATION. I, THE UNDERSIGNED, DECLARE THAT THE INFORMATION I HAVE PROVIDED ON THIS APPLICATION IS CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

CANDIDATE SIGNATURE.
DATE:
I APPROVE OF THIS APPLICATION AND UNDERSTAND THAT IF MY CHILD OR WARD IS NOMINATED TO A SERVICE ACADEMY, ANY ANNOUNCEMENT TO THI
NEWS MEDIA WILL BE MADE BY CONGRESSMAN GRIFFITH'S OFFICE.
PARENTAL SIGNATURE:
DATE:
PROVISIONS OF THE PRIVACY ACT OF 1974 ARE WAIVED TO THE EXTENT OF

PROVISIONS OF THE PRIVACY ACT OF 1974 ARE WAIVED TO THE EXTENT OF SHARING THIS INFORMATION WITH SERVICE ACADEMIES.

RETURN THIS COMPLETED APPLICATION BY OCTOBER 15, ALONG WITH:

- 1) CURRENT PHOTO
- 2) HIGH SCHOOL TRANSCRIPT
- 3) ACT or SAT RESULTS
- 4) RESUME OF ACTIVITIES
- 5) Essay-stating why you want to attend a service academy
- 6) MINIMUM OF THREE (3) LETTERS OF RECOMMENDATION

To: Office of Congressman H. Morgan Griffith Attn: Michelle Jenkins 323 W. Main St. Abingdon, Virginia 24210