U.S. Service Academy Nomination Application

Full Name				
	(Last)	(First)	(Middle)	
Resident of Mi	chigan's Fourth Con	gressional District? Yes	s No	
Permanent Add	dress			
		(Number and Street)		
	(City)	(State)	(Zip Code)	Affin Dhoto Hono
Telephone ()	E-Mail		Affix Photo Here (Photo should fit
I	/			within this box)
Height	Weight	Vision (Uncorrected) _		
			(i.e. Left: 20/20, Right: 20/40)	
Age	Date of Birth			
C		(Month/Day/Year)		
Place of Birth				
	(City, S	State)		

Family/Guardian Information

Father/Guardian's Name	Telephone ()			
Employer	Occupation			
Mother/Guardian's Name	Telephone ()			
Employer	Occupation			
Has any member of your family attended an academy and/or served in the military? If so, please make any notations				
here:				

High School Education

High School				
(Name)	(Number and Street)	(Cit	y) (State) (Zip)
Anticipated Graduation Date				
Other High Schools, if any				
(Name)	(Number and Street)	(City)	(State)	(Zip)
High School Counselor			Telephone ()_	
Grade Point Average/Scale (4.0-12.0)			Class Rank	Class Size
Have you completed any coll	ege-level courses? Yes	No		
If yes, which subjects and ho	w many credits did you receive?			

College Education (For Non-High School Seniors)					
College					
-	(name)		(City &	State)	
Full time student?	\Box Yes \Box No	Number of Ci	edits Enrolled		
		College]	Entrance Exam	S	
Have you taken the	ACT?	If yes	s, month/year taken?		
-			•	Science	Writing
Have you taken the SAT? If yes, month/year taken?					
Composite	Verbal		Math	Writing	
If you have not taken the SAT or ACT, or plan to retake either test, please indicate when you plan to do so?					
(Month/Year)					
*Contrary to what the procedure may be at each Academy, Congressman Moolenaar's Academy Selection Board will accept your best overall one-time test if you take the ACT or SAT more than once. If your test results are not available at this time, you must forward a copy of your test scores as soon as possible.					

Athletic Participation				
Sport	Seasons in Sport	No. of Varsity Letters	Special Recognition	

	Extracurricular Participation	
Club/Organization	Time with Club/Organization	Special Recognition

(If additional space is needed, please use an extra page to fill in all necessary information and attach to this page.)

Community Involvement				
Organization	Responsibilities	Special Recognition		

Employment				
Employer	Time with Employer	Responsibilities	Hours/Week	
Ano you now comving on mi	litary active duty? If yes, places me	In any notations have		
Are you now serving on m	litary active duty? If yes, please ma	ike any notations here:		

Personal Statement

Please submit a typed personal statement of no longer than one page indicating why you wish to attend a military academy and how your family, religious, educational, athletic, extracurricular, community or employment preparation has led you to make this choice. In your answer, please indicate how you would meet the unique intellectual and physical challenges of a military academy.

If you choose, you are welcome but not required to attach a personal resume of no more than one page listing past and present employment, community service, certificates, honors and other achievements you believe would benefit your candidacy for nomination.

General Information				
To which other nominating authorities have you applied (senators, vice president)?				
Rank your three academy preferences, more each.	ost desired first, and indicate whether yo	u have submitted an application with		
1. 2. 3.	1. □ Application Submitted 2. □ Application Submitted 3. □ Application Submitted			
Have you visited any academies?				
	Letters of Recommendation			
Please select a minimum of three (3) but it behalf. Your references may include teac not ask immediate family members such a Ask your references to write about how th qualities, describe an example of how you receive a nomination to a military academ	hers, coaches, neighbors, employers, cleas parents, siblings, or grandparents. ney came to know you and in what capace demonstrated sound character or judgm	ergy and community leaders. Please do eity. They should also define your ment and why they think you should		
List the names and titles and phone numb	ers of the references who will write lette	ers on your behalf.		
(Name)	(Phone Number)	(Title)		
(Name)	(Phone Number)	(Title)		
(Name)	(Phone Number)	(Title)		
(Name)	(Phone Number)	(Title)		
(Name)	(Phone Number)	(Title)		

I have read the information explaining Congressman Moolenaar's nominating procedures. I certify that I am a U.S. Citizen and a legal resident of the Fourth Congressional District and the information I am submitting is accurate. I understand that my application must be completed and returned to Congressman Moolenaar before 4 p.m. on November 9, 2018 to be given full consideration.

Signature_____

Date_____

Congressional Office Use Only			
Application	Letters of Recommendation		
High School Transcript	Letter(s) of Assurance		
ACT/SAT	Nomination(s) Offered		
Personal Statement	Appointment(s) Offered		



The Honorable John Moolenaar 200 East Main Street Suite 230 Midland, Michigan 48640 Phone: (989) 631-2552 www.house.gov/moolenaar

