

**APPLICATION FOR NOMINATION TO SERVICE ACADEMY**

Name *(first, middle, last)* \_\_\_\_\_

Home Address *(street)* \_\_\_\_\_

Town & Zip Code \_\_\_\_\_ County \_\_\_\_\_

Mailing Address *(if different from above)* \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parents' or Guardians' Names \_\_\_\_\_

High School \_\_\_\_\_ Phone \_\_\_\_\_

Address of High School \_\_\_\_\_

Date of Graduation from High School \_\_\_\_\_

GPA: \_\_\_\_\_ Rank in Class: \_\_\_\_\_ in a class of \_\_\_\_\_ students.

List in order of preference ***only those academies to which you are applying*** (leave others blank):

\_\_\_\_ Air Force      \_\_\_\_ Army      \_\_\_\_ Navy      \_\_\_\_ Merchant Marine

Are you seeking a nomination from another source, and if so, which source(s)? \_\_\_\_\_

Test Scores: SAT CR \_\_\_\_\_ M \_\_\_\_\_ W \_\_\_\_\_ Date taken \_\_\_\_\_

SAT CR \_\_\_\_\_ M \_\_\_\_\_ W \_\_\_\_\_ Date taken \_\_\_\_\_

ACT E \_\_\_\_\_ M \_\_\_\_\_ R \_\_\_\_\_ S \_\_\_\_\_ Date taken \_\_\_\_\_

Home of Record (for military dependents only) \_\_\_\_\_

**REFERENCES:**

Please list the names and addresses of three people who will be writing a reference for you. One of these must be from a principal, dean, teacher or guidance counselor at your high school or college. You are responsible for having the references submitted to me, or your file cannot be considered.

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

This application should be completed and returned by October 31 to:

Congresswoman Chellie Pingree  
2 Portland Fish Pier, Suite 304, Portland, Maine 04101  
Attn: Leslie Merrill  
FAX: (207) 871-0720  
leslie.merrill@mail.house.gov