



REQUEST FOR CONGRESSIONAL NOMINATION

Candidate Information

Full Name: _____
(as it appears on your birth certificate)

Date of Birth: _____ Place of Birth: _____ Gender: _____

Your Address: _____
(include both permanent and mailing address plus zip code)

Home Phone: _____ Cell Phone: _____ E-Mail: _____

Parent Information

Parent Names/Address: _____

Parent Phone: _____ Parent Email: _____

School Information

High School: _____

(name and address)

Date of High School Graduation: _____

Approximate standing is _____ in a class of _____

Current School/University/College: _____ When will you graduate? _____

Special skills, training or certification (i.e., foreign language proficiency, pilot certified, etc.):

Academy preference ranked 1-4 (if you only want one academy rank only that one):

Air Force _____

Army _____

Merchant Marine _____

Navy _____