



REQUEST FOR CONGRESSIONAL NOMINATION

Full Name: _____

(as it appears on your birth certificate)

Your Address: _____

(include both permanent and mailing address and zip code)

Telephone: _____ Cell Phone: _____

E-Mail Address: _____

Names, address & phone of parents _____

Parent's Email: _____

Date of Birth: _____ Place of birth: _____

Gender: _____

High School: _____

(name and address)

Date of High School Graduation: _____

Approximate Standing is _____ in a class of _____

Current School/college: _____ When will you graduate: _____

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

Academy Preference rank from 1-4 (if you only want one academy list only that one):

Air Force _____

Army _____

Merchant Marine _____

Navy _____