

Office of the First Congressional District of Rhode Island

United States Service Academy Nomination Application

Application Instructions

To be considered for nomination, the following information must be fully and accurately completed and mailed to:

Office of the First Congressional District of Rhode Island 1070 Main Street, Suite 300 ATTN: Service Academy Nomination Pawtucket, RI 02860

Any missing information could prolong the process or adversely affect your chances for nomination. If we can offer any assistance, or if you have questions regarding the content of this form, please call the office at (401) 729-5600.

Privacy Act Statement: The submission of the requested information constitutes authorization for review of this information by the Office of the First Congressional District and the Member of Congress that will be elected in the 2023 election, including their staff, Service Academy Nomination Review Board, and whomever else the Member deems necessary to execute a successful Service Academy Nomination process.

Applicant Information

Please <u>print clearly or type</u> the following information:

Name:									
First		Middle Initial		Last					
Mailing Address:			CTDEE		·····				
		SIKEE	TADDRES	5					
		CITY	/	STATE	/	ZIP			
Home Phone:									
Cell Phone:									
E-Mail:									
Date of Birth:		MM	/	DD	/	YYYY			
Place of Birth:			CITY	/	STATE				
Will you be 17, but Merchant Marine A	not yet 23 y Academy)?:	ears of age Yes	, by Ju No	lly 1 of	the ye	ar you a	re adm	nitted (25	for
Mother's Name:	 First			Last					
Father's Name:	 First			Last					

	er of your family affende e provide their <u>Name, Serv</u>	·		No <u>uation</u> .
		1		
Are you apı	olying for a nomination fro	om any other source?	Yes	No
Whom?	Senator Reed	Senator Whitehou	use	
lf your father	est interest to request a nom or mother is active duty mill eligible for a Presidential or	itary, retired military, or v	vas killed in d	-
Will you be	a United States' citizen at	the time of enrollment	? Yes	No
Are vou a re	esident of the First District (of Rhode Island?	Yes	No

Have you applied for a nomination in a previous year?

Yes

No

Academy Preferences

You must start the application process at each academy for which you are seeking a nomination. Please rank **ONLY** the Service Academies to which you are applying, with 1 being your top choice. Select N/A if not applying to one of the academies.

United States Air Force Acad					
United States Merchant Mar					
United States Military Academy					
United States Naval Academy					
Have you been contacted directly by an Academy? Yes No					
If yes, which Academy?					
Have you been contacted by Academy athletic coaches? Yes No					
If yes, which Academy and Sport?					

Academic Qualifications

High School:						
High School Address:						
		CITY	/ /	STATE /	ZIP	
High School Guide	ance Counselor:					
High School Graduation Date:						
Current Grade Point Average: GPA must be calculated on a 4.0 scale.						
Class Rank:						
SAT Test Scores:						
	Math:					
	Critical Reading:					
ACT Test Scores:						
	Math:					
	Critical Reading:					

Official SAT/ACT Test Scores must be submitted in order to validate your scores.

College/University: (If Applicable)	
College/University Address: (If Applicable)	STREET ADDRESS
	CITY / STATE / ZIP
College/University Advisor: (If Applicable)	
Expected Graduation Date: (If Applicable)	
College/University Current Grade Po (If Applicable) GPA must be calculated on a 4.0 scale.	_

Essay

Please write a one page or less essay about why you are a good choice for a nomination to a United States Service Academy. Please be sure to include any information you feel has prepared you for this challenge and makes you stand out from the rest of the applicants. Attach the essay when you submit your application.

<u>Please use Times New Roman font, sized 12, and double spacing.</u>
Violation will inhibit your application.

Additional Items Required

Applicant's Signature

1. Official High School (and college if applicable) Transcript	
2. Official SAT/ACT Test Scores	
 Two Letters of Recommendation (A professional or academic, and a personal recommendation) 	
 A resume detailing your extracurricular activities, athletic activities, leadership positions, awards or special recognitions, and employment history 	y.
Privacy Statement	
I certify that I have read the Privacy Act Statement. The information provided in this application is true and correct to the best of my knowledge. I understand that I am also required to submit all of the items required to complete my application before the deadline. I further certify that I am a legal resident of the First District of the State of Rhode Island.	

Date