



Service Academy Candidate Information Sheet

Personal:

Full Name (first, middle, last): _____ **Preferred Name:** _____

Date of Birth: _____ **Email:** _____

Mailing Address: _____
City State Zip +4

Cell Number: _____ **Home Number:** _____

Current School: _____ **High School Graduation Year:** _____

U.S. Citizen? YES___ NO___ **Have you ever been convicted of a felony?** YES___ NO___

I am applying & seeking a nomination to the following academies: (List in order of preference)

1. _____ 2. _____

3. _____ 4. _____

Medical:

1. **Do you anticipate any medical problems?** YES___ NO___

If yes, please state the nature of any anticipated problems:

Academic:

1. **Class Ranking:** _____ **in a class of** _____

2. **GPA:** **Weighted** _____ **Unweighted** _____

3. SAT Scores: Math:_____ Reading & Writing:_____ Total:_____

4. ACT Scores: Math:_____ English:_____ Reading:_____ Science:_____

5. AP/Honors Courses: _____

6. Please indicate involvement in the following activities and **explain**:

Academic Awards and Honors:

() Valedictorian:_____

() Salutatorian:_____

() National Honor Society:_____

() Beta Club:_____

() Scholarships:_____

() Academic Awards:_____

() National Merit Scholar:_____

() ROTC Scholarship:_____

() Others:_____

Extracurricular Activities:

() Class or Student Body Office:_____

() Athletics:_____

() School Clubs: _____

() Boy/Girl Scouts: _____

() Eagle/Gold Scout Award: _____

() Boy/Girls State: _____

() Youth Service Groups: _____

() School Publication Staff: _____

() Debate Team: _____

() ROTC: _____

() Others: _____

Use additional paper if necessary.

Parents' Full Names: _____

Parents' Address: _____
City State Zip +4

Parents' Phone Numbers(s) : _____

Hometown Newspaper: _____

By signing below, I hereby certify that:

-The information on this form and in other items from my packet is accurate and truthful. Any changes to this information will be reported immediately.

-I am a legal resident of North Carolina's 8th Congressional District.

-I have read the nominating procedures and am familiar with the nomination criteria and requirements.

-I understand that if I have committed (or commit in the future) a serious act of misconduct, I must disclose this information to the Office of Congressman Hudson as soon as possible. A serious act of misconduct includes (but is not limited to) conviction of a crime, an act of dishonesty, acts of theft or misappropriation of property, cheating, etc.

-I understand that, in order to be considered, all the required application items must be submitted to and received by the Concord District Office by 5:00 p.m. on Tuesday, November 22, 2016.

Signature

Date

Print Full Name

**Please return to: Congressman Richard Hudson (NC-08)
325 McGill Avenue NW, Suite 500
Concord, NC 28027**