18th Congressional District of California Application for Congressional Nomination to a United States Service Academy

This application is comprised of three (3) pages. Please be sure to read and complete each.

Academy Choice

Please indicate the Academy to which you are seeking a nomination. Each applicant is allowed to **request nomination to one Academy only**.

 □ U.S. Military Academy (West Point) □ U.S. Naval Academy (Annapolis) □ U.S. Coast Guard Academy 	
□ U.S. Merchant Marine Academy□ U.S. Air Force Academy	
Applicant Personal Information	
Full name: (last, first, middle)	
Birthdate: (MM/DD/YYYY)	
Social Security Number:	
Permanent address: (street, city, zip code)	
Mailing address: (street, city, zip code)	
Telephone number:	
Email address:	
U.S. Citizen: Yes No	

Academic Information High School:		
Year in school:	Cumulative GPA:	Class Rank:
Highest SAT1 or ACT score:	Date of exam:	Graduation date:
Extracurricular activities (athletics, hobbies, comm	nunity involvement, etc.)	
Work experience		
Please list any awards or	special commendations that	you have received
Please list any medical o	conditions requiring specia	al attention
Parent/Guardian Information Full name/s:	mation	
Is one or both of your Parlist)	rents/Guardians a graduate o	of a U.S. Service Academy? (if yes, please
Is there a member of you military?	r family who is currently ser	rving, or has previously served in the

Nomination Information Have you requested a preliminary candidate questionnaire from the Academy of your choice?
Yes No
Have you requested a nomination from any other source, i.e., U.S. Senators, the President, or Vice President? If so, please list.
Essays Please answer the following questions in essay form, single-spaced and on no more than one page each:
1. Describe a challenging experience you have had, explain how you overcame it, and what you learned about yourself in the process.
2. For what reasons would you like to attend the Service Academy you have indicated instead of a civilian university?
POLICY REGARDING CHANGES TO THIS APPLICATION
If you wish to request a change to this application (i.e., a request for a different interview, submission of different essays, or other substantial changes), you must submit your request in writing, with your signature and date. All such requests will be reviewed by Rep. Eshoo, and will be approved or disapproved at her discretion.
Signature
I, (applicant's name), the undersigned, certify that the information in this application is complete and accurate to the best of my knowledge. I also have read and understand the above policy regarding changes to this application.
(Applicant's signature) (Date)

If you have any questions, please contact Zachary Ota at (650) 323-2984 or by emailing service.academy@mail.house.gov, with email subject line: "Military Academy Applicant (Your Name)".