

Congresswoman Niki Tsongas

Representing the Third Congressional District of Massachusetts

Service Academy Nomination Application

Complete application packets must be <u>received</u> by my office by 5:00 PM EST on November 15, 2017.

A complete application packet consists of:

Com _l	pleted Service Academy Nomination Application Form (included here)
Three	e Letters of Recommendation
Resu	me and/or List of Activities and Accomplishments
Offic	ial Academic Transcripts
Photo	o of Yourself
Offic	ial SAT/ACT Score reports (if not reported on your transcript(s))
	Collegeboard code: 3016

Privacy Act Statement: The submission of the requested information constitutes authorization for review of this information by Representative Niki Tsongas, her staff, her Service Academy Review Board, the Academy Admission Office, and the media.









Please <u>print clearly or type</u> the following information (this form is available on http://tsongas.house.gov for downloading and typing responses):

I. Applicant Information

First Name	Last Name	Suffix	Preferred Name/Nickname	
Social Security Number	er (Required if you recei	ve a nomination):		
Permanent Home Add		,		
Street:				
City:				
State:	rate: Zip:			
Phone:				
Alternate Address:				
Street:				
City:				
State:		Zip:		
Phone:				
Preferred Contact Telephone Number:				
Preferred Email Addro	ess:			

Gender: [] Male [] Female		
Date of Birth:		
Will you be 17 but not yet 23 years of age by July 1 of the year you	are admitted?	
[]Yes[]No		
Mother's Name:	<u>-</u>	
Father's Name:		
Legal Guardian (if applicable):		
Are you applying for a nomination from any other source?		
[]Yes[]No		
Whom? President Sen. Warren Sen. 3	Markey	
Other		
It is in your best interest to request a nomination through all sources available to you active duty military, retired military, or was killed in action, you may be eligible for a nomination.	000	
Will you be a United States' citizen at the time of enrollment?	[] Yes	[] N o
Are you a resident of the Third Congressional District?	[] Yes	[] No
Have you applied for a nomination in a previous year?	[] Yes	[]No

II. Academy Preferences

Please rank each or	f the Academies in <u>your ord</u>	ler of preferen	ce for atten	dance, with one being your	
first choice. Only 1	ank Academies you will att	end if admitte	ed. Leave o	thers blank.	
Air Force	Army	Navy		_ Merchant Marine	
Have you been con	ntacted directly by an Acade	emy?] Yes	[] No	
If yes, which Acade	emy and who?				
Have you ever serv	ed in the military in any ca	pacity?			
If yes, what is the h	nighest rank you held?				
III. Academic Q	ualifications				
High School:		Telephon	e Number:_		
Mailing Address: _					
Principal:	Counselor:		Gra	duation Year:	
Test Scores:	SAT Evidence-based Re	ading and Wri	ting		
	SAT Math				
	SAT Optional Essay				
	And/Or				
	ACT English				
	ACT Math				
	ACT Reading				
	ACT Science/Reasoning	5			
	ACT Plus Writing	(requi	red by USM	IA)	
Are you scheduled	to re-take any of your tests:	?	Date(s): _		
ACT/SAT scores repo	rted on your official certified transc	ript are acceptable	•		
High School Class If your school does not re	Rank out of _	clas	ss size.		
Class Percentile: T	Cop 1% 5% 10%	25% 50%	o 0		
Grade Point Averag	ge (GPA):	Grade Scal	e Used:		
Grade Point Average, S	Scale, Class Rank and Size must l	be included on you	r high school tr	anscript.	

4

College(s)) attended (if applica	ıble):		
City/State	e:			
Major:			ars Attended:	
Hours Completed:			ade Point Average:	
	Placement Courses			
Academic	: Awards or Special A	Achievements:		
•	ional explanations conow?		_	s you want the interview
	etic Activities 2 and college (if applicable))		
Sport	Years in Sport	Number of Varsity Letters	Years as Captain or Co-Captain	Years Receiving Special Recognition
Athletic A	wards or Special Acl	hievement:		

Have you been in of If so:	contact with atl	hletic coaches or staff at any A	Academy? [] Yes [] No
Academy	<u>Sport</u>	Coach/Contact Name	<u>Telephone Number</u>
V. Non-Athletic	Activities		
List other non-athl	etic extracurric	cular activities and leadership	positions:
Last other non atm	etie extracullie	cular activities and leadership	positions.
Non-athletic award	ds or special ac	hievements:	
	.		
V. Prior Service			
Have you had any	nrior service w	ith the military?	
	_	Reserve [] No	
		Highest Rank	
Dianen.	10013.	IIIghest Rains	·
	dparent or sibli	ing attended a Service Acader	my?
Has a parent, gran			
Has a parent, gran Name	•	Service Academy	Year of Graduation
1		Service Academy	Year of Graduation

VII. Employment History

Reverse chronological order; use additional sheets if necessary.

Place	Dates	Position	Hours per week worked
Motivation for working	g:		
VIII Other informat	ion wou want the Co	ongresswoman or the int	omion panal to know
VIII. Other informat	ion you want the Co	ongresswoman or the mit	erview paner to know.
IX. Acknowledgem	ent		
knowledge. I understation items on the application must be in receipt of a	and that in addition on check-list. I furth all application mater ation from Congres	to this application, I am er understand that Cong rials no later than 5:00 p.	ad correct to the best of my also required to submit all of the cresswoman Tsongas's Office m. November 16, 2016. I understand not guarantee admission to a United
Signature:		Date:	
Return your completed	l application packet	to:	

Office of Congresswoman Niki Tsongas
ATTN: Service Academy Coordinator
126 John Street, Suite 12
Lowell, MA 01852