

2009 Service Academy Nomination Application

Congresswoman Donna F. Edwards
5001 Silver Hill Road, Suite 106
Suitland, MD 20746

Deadline: October 16, 2009
Application Page 1

APPLICANT CHECKLIST

Complete this form, sign, date, and return it to the office with your completed application for a nomination. Check with your sources for recommendations to confirm that the letters have been mailed. The office address is 5001 Silver Hill Road, Suite 106, Suitland, MD 20746. The telephone number is (301) 516-7601. This form and all related documents must be received by **Friday, October 16, 2009**.

NAME: _____
Last First (Nickname) Middle

ADDRESS: _____
Street Number City State Zip + 4

HOME PHONE: _____ ALT. PHONE: _____

E-MAIL ADDRESS: _____ SOC. SEC NO. _____

1. I mailed my completed application on: _____
Date

2. The three letters of recommendation were mailed by the following people on the dates indicated:

a. _____, on _____
Name Date

b. _____, on _____
Name Date

c. _____, on _____
Name Date

3. My high school transcript was mailed by my school or guidance counselor on:

Date

4. My SAT scores have been mailed to code

Last SAT test taken on: _____

My ACT scores have been mailed to code

Last ACT test taken on: _____

Future ACT/SAT tests I anticipate taking: _____

5. The Affidavit of Residence was mailed by my parent/guardian:

_____, on _____
Name Date

6. I have had an eye examination recently, and my vision is correct/correctable in accordance with the requirements of the academy/ies in which I am interested.

7. I have initiated my file at each academy for which I am requesting a nomination.

Applicant's Signature: _____ Date: _____

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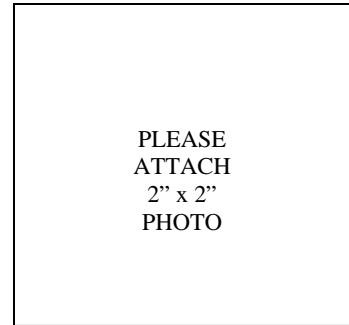
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APPLICANT BASIC FACT SHEET
PLEASE TYPE YOUR ANSWERS

NAME: _____
Last First (Nickname) Middle

PERMANENT ADDRESS: _____
Street Number

City State Zip + 4



HOME PHONE: _____ ALTERNATE PHONE: _____

APPLICANT'S CELL PHONE: _____

APPLICANT'S CURRENT ADDRESS (If different : _____
from permanent address) Street Number City State Zip + 4

HEIGHT: _____ WEIGHT: _____ EMAIL ADDRESS: _____

DATE OF BIRTH (MM/DD/YYYY): _____ PLACE OF BIRTH: _____

MOTHER'S NAME: _____ FATHER'S NAME: _____

HIGH SCHOOL: _____ EXPECTED DATE OF GRADUATION: _____

ARE YOU CURRENTLY ATTENDING COLLEGE OR ACADEMY PREP SCHOOL? _____ IF SO, PLEASE PROVIDE

SCHOOL NAME AND ADDRESS: _____

SCHOOL PHONE: _____ DATES OF ATTENDANCE: _____

IF YOU ARE SERVING IN THE ARMED FORCES, IDENTIFY BRANCH OF SERVICE, RANK AND ENTRY DATE:

PLEASE IDENTIFY ANY OTHER SOURCES YOU PLAN TO CONTACT FOR A NOMINATION:

_____ Presidential _____ Vice Presidential _____ Senatorial _____ Other

ACADEMY PREFERENCE (PLEASE INDICATE YOUR 1st, 2nd, 3rd, and 4th CHOICES.)

_____ **US Air Force Academy** _____ **US Merchant Marine Academy**
_____ **US Military Academy** _____ **US Naval Academy**

INDICATING YOUR PREFERENCES WILL NOT IN ANY WAY AFFECT REP. DONNA F. EDWARDS CONSIDERATION OF YOUR FIRST CHOICE. YOU MAY CHOOSE TO INDICATE ONLY ONE ACADEMY PREFERENCE. HOWEVER, MULTIPLE PREFERENCES INCREASE YOUR POTENTIAL FOR RECEIVING A NOMINATION.

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NAME: _____

4. What experiences in your life have prepared you for the rigors and demands of life at an academy?

5. Please describe any significant or meaningful work or volunteer experience you have had.

6. Please list the sports and team activities in which you have participated. Include any leadership positions you have held and any honors you have received.

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NAME: _____

7. Please list the primary community and extracurricular activities in which you have been involved.

8. Please list the academic areas that are of greatest interest to you.

9. Please list academic or community honors, prizes or awards you have received in the order of their importance to you.

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NAME: _____

10. Omitting text books, please list any books you have read in the last year. Which have you most enjoyed and why?

11. Please describe any interesting travel experiences you have had.

12. Have you been arrested, convicted, or fined for any violation or law (other than minor traffic violations)? Have you ever been placed on probation, suspended or expelled from school? If so, please explain.

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NAME: _____

13. Do you intend to make military service your career? If you are appointed to an academy, what specialty areas would you wish to pursue (e.g., infantry, medical, engineering, aeronautics)?

14. Is there anything else that you would like to share about yourself?

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NAME: _____

APPLICANT ESSAY

Please write an essay of 250-500 words, in your own handwriting, on this page, explaining why you would like to attend a United States Service Academy. This essay should not be a biographical sketch. **Please attach a typed copy of your essay.**

NAME: _____

AFFIDAVIT OF RESIDENCE

This form is to be completed by the parent or legal guardian of the individual seeking a nomination to a United States Service Academy. If the applicant is not a minor, the form may be completed by him/her.

This statement establishes that the applicant and his/her parent or guardian is a resident of the State of Maryland. An individual is a resident of Maryland if the individual is domiciled in Maryland on the last day of the taxable year or the individual maintains a place of abode in Maryland for more than six months of the taxable year and is physically present in the State for more than 183 days during the taxable year.

I, _____, being of lawful age (18) and a resident of,
_____, Maryland,
(City and County)

do under oath and penalties of perjury, depose and say that:

1. I am the parent entitled to the custody of, or the legal guardian of _____, a minor, or am the applicant who has reached the age of majority, who has applied to Representative Donna F. Edwards for consideration as a nominee to a United States Service Academy; that the applicant is my son/daughter and/or is my legal ward who lives with me; and that our/my domicile is:

(Address, including City or Town and State)

2. In evidence thereof, I depose and say that:

I am registered as a voter in _____
(City, County, and State)

or

I file income tax returns and pay state income taxes to the State of _____

or

I have the following document evidencing my legal residence: _____

Signature Date

Subscribed and sworn to before me this _____ day of _____, 2009.

Notary Public