

**APPLICATION FOR SERVICE ACADEMY NOMINATION
OFFICE OF CONGRESSMAN BRAD CARSON
SECOND U.S. CONGRESSIONAL DISTRICT**

PLEASE TYPE OR PRINT

FULL NAME: _____

CURRENT ADDRESS: _____

PHONE NUMBER: _____

NAME OF PARENTS: _____

PARENT'S ADDRESS: _____

COUNTY: _____ BIRTH PLACE: _____

AGE: _____ BIRTH DATE: ____/____/____ SOCIAL SECURITY #: ____/____/____

MALE _____ FEMALE _____ WEIGHT: _____ HEIGHT: _____

PRESENT SCHOOL (HIGH SCHOOL OR COLLEGE): _____

DATE OF GRADUATION (FROM HIGH SCHOOL): _____

CLASS RANK: _____ OUT OF _____

CUMULATIVE GPA _____ BASED ON _____ POINT SCALE

ACT TEST SCORES: ENGLISH: _____ MATH: _____ READING: _____ SCIENCE: _____

OR

SAT TEST SCORES: ENGLISH: _____ MATH: _____

ACADEMIES IN ORDER OF PREFERENCES (WEST POINT, AIR FORCE, NAVAL, MERCHANT MARINE)

1. _____ 2. _____ 3. _____ 4. _____

HAVE YOU MADE ANY OTHER APPLICATION? _____

IF SO, WHEN _____ WITH WHOM? _____

DATE OF APPLICATION

SIGNATURE

PLEASE ATTACH A SEPARATE PAGE LISTING YOUR EXTRACURRICULAR ACTIVITIES (ATHLETIC AND NON-ATHLETIC), WORK EXPERIENCE, ANY HONORS OR AWARDS YOU HAVE RECEIVED, A RECENT PHOTOGRAPH, AND A SHORT STATEMENT ON THE REASONS FOR WANTING TO ENTER A SERVICE ACADEMY.

PLEASE RETURN THIS APPLICATION WITH REQUIRED INFORMATION TO:

**CONGRESSMAN BRAD CARSON
301 W. 1ST STREET
CLAREMORE, OK 74017**