

 CONGRESSMAN H. MORGAN GRIFFITH
SERVICE ACADEMY APPLICATION

PERSONAL INFORMATION

NAME: _____
(FIRST, MIDDLE, LAST)

PREFERRED NAME (IF DIFFERENT THAN ABOVE): _____

SEX: _____ **DATE OF BIRTH:** _____

SOCIAL SECURITY NUMBER: _____

NINTH DISTRICT ADDRESS: _____

CITY, STATE, ZIP: _____

COUNTY: _____

HOME TELEPHONE: _____

CELL PHONE: _____

EMAIL ADDRESS: _____

MOTHER'S NAME: _____

ADDRESS (IF DIFFERENT): _____

FATHER'S NAME: _____

ADDRESS (IF DIFFERENT): _____

HIGH SCHOOL INFORMATION

NAME OF HIGH SCHOOL: _____

COUNTY: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

DATE OF GRADUATION: _____

GPA/SCALE: _____ **CLASS STANDING:** ____ **OF** _____

COLLEGE INFORMATION (IF APPLICABLE)

NAME OF COLLEGE: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

MAJOR: _____

GPA/SCALE: _____ **CREDIT HOURS:** _____

DATE OF GRADUATION: _____

COLLEGE ENTRANCE EXAMINATIONS

SAT SCORES:

1ST EXAM DATE & SCORE: _____

2ND EXAM DATE & SCORE: _____

3RD EXAM DATE & SCORE: _____

ACT SCORES:

1ST EXAM DATE & SCORE: _____

2ND EXAM DATE & SCORE: _____

3RD EXAM DATE & SCORE: _____

CLT SCORES:

1ST EXAM DATE & SCORE: _____

2ND EXAM DATE & SCORE: _____

3RD EXAM DATE & SCORE: _____

ACADEMY PREFERENCE

IF YOU DESIRE TO BE CONSIDERED FOR NOMINATION TO ONE OR MORE OF THE ACADEMIES LISTED BELOW, PLEASE INDICATE YOUR CHOICE NUMERICALLY FROM 1 TO 4. USE N/A IF YOU ARE NOT INTERESTED IN A PARTICULAR ACADEMY. CIRCLE Y FOR YES AND N FOR NO IF YOU HAVE STARTED A PRELIMINARY APPLICATION TO THAT ACADEMY.

_____ **AIR FORCE**

Y N

_____ **MILITARY**

Y N

_____ **MERCHANT MARINE**

Y N

_____ **NAVAL**

Y N

*****THE U.S. COAST GUARD ACADEMY DOES NOT REQUIRE A CONGRESSIONAL NOMINATION.**

OTHER NOMINATING SOURCES

ARE YOU ELIGIBLE FOR A PRESIDENTIAL NOMINATION? Y N

PLEASE CHECK ALL OTHER SERVICE ACADEMIES' NOMINATING SOURCES THAT YOU PLAN TO PURSUE:

_____ **PRESIDENT DONALD TRUMP**

_____ **VICE PRESIDENT JD VANCE** _____ **SENATOR TIM KAINE**

_____ **SENATOR MARK WARNER** _____ **JROTC**

ACKNOWLEDGEMENT: I REQUEST THAT CONGRESSMAN GRIFFITH CONSIDER MY APPLICATION FOR A CONGRESSIONAL NOMINATION TO THE UNITED STATES SERVICE ACADEMY OR ACADEMIES THAT I HAVE LISTED. I AFFIRM THAT I HAVE NEVER BEEN CONVICTED OR ARRESTED FOR VIOLATING A STATE OR FEDERAL STATUTE. I UNDERSTAND THAT THE DEADLINE FOR APPLICATIONS TO BE RECEIVED IN THE OFFICE IS OCTOBER 15. IF I HAVE NOT SUBMITTED ALL OF THE REQUESTED INFORMATION BY THAT DEADLINE, I UNDERSTAND THAT MY APPLICATION MAY NOT BE GIVEN FULL CONSIDERATION. I, THE UNDERSIGNED, DECLARE THAT THE INFORMATION I HAVE PROVIDED ON THIS APPLICATION IS CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

CANDIDATE SIGNATURE: _____

DATE: _____

I APPROVE OF THIS APPLICATION AND UNDERSTAND THAT IF MY CHILD OR WARD IS NOMINATED TO A SERVICE ACADEMY, ANY ANNOUNCEMENT TO THE NEWS MEDIA WILL BE MADE BY CONGRESSMAN GRIFFITH'S OFFICE.

PARENTAL SIGNATURE: _____

DATE: _____

PROVISIONS OF THE PRIVACY ACT OF 1974 ARE WAIVED TO THE EXTENT OF SHARING THIS INFORMATION WITH SERVICE ACADEMIES.

RETURN THIS COMPLETED APPLICATION TO OUR OFFICE BY OCTOBER 15, ALONG WITH:

- 1) CURRENT PHOTO**
- 2) HIGH SCHOOL TRANSCRIPT**
- 3) ACT, SAT OR CLT RESULTS**
- 4) RESUME OF ACTIVITIES**
- 5) ESSAY—STATING WHY YOU WANT TO ATTEND A SERVICE ACADEMY**
- 6) MINIMUM OF THREE (3) LETTERS OF RECOMMENDATION**

APPLICATIONS AND QUESTIONS MAY BE MAILED OR EMAILED:

MAIL: OFFICE OF CONGRESSMAN H. MORGAN GRIFFITH

ATTN: CODY RUSH, 17 WEST MAIN STREET, CHRISTIANSBURG, VA 24073

EMAIL: VA09SERVICEACADEMY@MAIL.HOUSE.GOV