

Application for Nomination to the United States Service Academies

United States Senator Jeanne Shaheen For Classes Entering Summer, 2012

Instructions

Please type or print neatly. All application materials must be postmarked <u>NO LATER THAN October 3rd, 2011</u>. Due to the high volume of applicants, applications submitted or postmarked after the due date will not be accepted. *After completion please return this application, along with all other application materials to: Office of Senator Jeanne Shaheen, Attn: Academy Nomination Coordinator, 1589 Elm Street, Floor 3, Manchester, N.H. 03101.*

Name:				
(As recorded on b	birth certificate)			
Academy Pro	eference:			
(Please rank the a	academies to which you v	vill accept a nomination in	order of preferen	ce, 1-4. If you only have one choice, mark "only.")
Uni	ited States Air Ford	e Academy		United States Merchant Marine Academy
Uni	ited States Military	Academy		United States Naval Academy
Have you op	ened an application	on with the Acader	my?] Yes No
(If no, please do s	so immediately. This will	allow my office to track yo	our application onl	ine.)
Permanent /	Address:			Current Address (if different):
(Number and Stre	eet)		-	(Number and Street)
(City/State/Zip)			-	(City/State/Zip)
(Permanent Telep	phone)		-	(Current Telephone)
Cell Phone:	<u>-</u>		_	Email:
Gender :	☐ Male	☐ Female		Social Security Number:
Date of Birth:			_	Place of Birth:
Are you a cit	tizen of the United	States?	☐ Yes	□ No
-	egal Resident of Ne	•	Yes ate, please provid	No e proof of legal N.H. residence)
County of Re	esidence:			State (if not N.H.):

lame of Parents/Legal G	uardian(s) (and address if di	ifferent from applica	ant's permanent address):
currently Attending: High School	☐ 2 year college	☐ 4 year	college Prep School
lame and Address of Hig Please include the information for		e high schools have I	been attended)
lame of School)		_	(Name of School)
Number and Street)		_	(Number and Street)
City/State/Zip)		_	(City/State/Zip)
Felephone)		_	(Telephone)
Current GPA:	on a scale of		<u>_</u>
Rank in Class:	in a class of		My high school does not rank students
expected Date of Gradua		of	
SAT Scores:	(Month)		(Year)
Please remember to provide copie.	s of these scores with your com	pleted application)	
ate Taken	, ,		
ritical Reading			
Mathematics			
Vriting			
ACT Scores:			
Please remember to provide copie	s of these scores with your comp	pleted application)	
Date Taken	 -		_
Composite			_
Other Congressional offic	es to which you are ap	plying for a no	omination:
Please note that this will not adver	sely affect your application for a	nomination)	
By signing my name h	elow Laffirm that all in	oformation cor	ntained in this application is my own work, comple
by signing my name b			onestly presented.
		(Applicant Sigr	nature)