

Congress of the United States
House of Representatives
Washington, DC 20515

Service Academy Application Form

Applicant Information

Full Name: _____ Date: _____
Last
First
M.I.

Address: _____
Street Address
Apartment/Unit #

City
State
ZIP Code

Phone: _____ Email: _____

Education

High School: _____ Address: _____

Where are you applying to ?

Please rank 1st – 4th choice.

U.S Military Academy _____ Have you started an application? Yes Or No _____	U.S. Naval Academy _____ Have you started an application? Yes Or No _____
U.S. Air Force Academy _____ Have you started an application? Yes Or No _____	U.S. Marchant Marine Academy _____ Have you started an application? Yes Or No _____

Checklist

Checklist	*Staff Initials
<input type="checkbox"/> Completed Service Academy Application Form	
<input type="checkbox"/> Photo (with name on reverse if hard copy)	
<input type="checkbox"/> Resume	
<input type="checkbox"/> Essay (500 Words)	
<input type="checkbox"/> Transcript(s)	
<input type="checkbox"/> Test Score(s) ACT & SAT	
<input type="checkbox"/> Letter of Recommendation	
<input type="checkbox"/> Letter of Recommendation	
Applicant Signature	(* FOR OFFICE USE ONLY)