



## Application for Nomination to the United States Service Academies Office of Congressman Andy Barr

### Personal Information

Full Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_  
Street Address  
\_\_\_\_\_  
City State Zip

Permanent Address: \_\_\_\_\_  
(If different) Street Address  
\_\_\_\_\_  
City State Zip

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ Gender: Male / Female Are you a U.S. Citizen?: Yes / No

Parents/Guardians: \_\_\_\_\_

Parents/Guardians Phone #: \_\_\_\_\_

Name of hometown newspaper: \_\_\_\_\_

### Academy Information

Number your preference (1 to 4) of Academies beginning with 1 as your highest preference and only the Academies that you wish to attend. It is recommended to apply to at least two academies, thereby giving yourself the most options of earning an appointment to one of the academies:

\_\_\_\_\_ U.S. Air Force Academy

\_\_\_\_\_ U.S. Merchant Marine Academy

\_\_\_\_\_ U.S. Military Academy (West Point)

\_\_\_\_\_ U.S. Naval Academy

Have applications been submitted to Academies for which you are apply for a nomination?: Yes / No

*Note: In addition to applying for a nomination through the Office of Congressman Barr, you must directly apply to each Service Academy for which you are seeking a nomination.*

Other Nominations sources you are applying to: \_\_\_\_\_

*Note: For the best chance of nomination, it is recommended to apply to all nomination sources.*

## Education Information

Name of High School: \_\_\_\_\_

High School Address: \_\_\_\_\_

Street Address

City

State

Zip

### Section to be completed by Counselor or Principal

GPA: \_\_\_\_\_ Class Size: \_\_\_\_\_ Rank: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

#### Test Scores

ACT Score

Composite: \_\_\_\_\_ English: \_\_\_\_\_ Math: \_\_\_\_\_ Reading: \_\_\_\_\_ Science: \_\_\_\_\_

SAT Score (if applicable)

Composite: \_\_\_\_\_ Math: \_\_\_\_\_ Writing: \_\_\_\_\_ Critical Reading: \_\_\_\_\_

Counselor/Principal Name: \_\_\_\_\_

Counselor/Principal signature certifying above education information:

X \_\_\_\_\_ Date: \_\_\_\_\_

## Additional Requirements

Please include the following documents with your completed application to be considered for a nomination:

### Essay

A 250-word personal ambition statement as to why you hope to attend one of the Service Academies.

### Letters of Recommendation

A minimum of three letters of recommendation are required as part of the application. Typically, letters of recommendation come from teachers, counselors, employers, coaches, clergy or Scout Leaders; however, letters are not limited to those specific people.

## **Extra-Curricular Activities**

On a separate piece of paper, please describe all extra-curricular activities in which you have participated. Include school related activities as well as community or church-related activities. Also, please indicate any part-time work while in high school. Describe your responsibilities, as well as the number of hours per week in which you have worked.

## **High School Transcript**

Please include a copy of your high school transcript certified by a faculty or staff member.

## **Headshot**

Please include a headshot of yourself. A professional photo is not required.

## **Application Agreement**

Please read the following paragraph before signing the application, as your signature indicates your agreement with the following statements. If you do not include your signature, your application will not be considered for nomination.

It is my sincere desire to attend a U.S. Service Academy, and I intend to pursue a vigorous academic course of study if appointed. I understand that attending a service academy also requires a minimum of five years of military service following graduation, and I fully commit to this responsibility. I am a U.S. Citizen, or will be by July 1 of the year I will attend the Academy. I will be at least 17 years, but not yet 23 years of age, on July 1 of the year I attend the Academy. I am not married. I am not pregnant, nor do I have any child support obligations. I am a legal resident of the Sixth Congressional District of Kentucky. If selected for a nomination, I authorize the Office of Congressman Andy Barr to release my name as a nominee in a press release or other office media.

I certify that the information I have provided in the application packet is accurate. Any changes to this information will be reported immediately. Additionally, I understand that I will not be considered for a nomination if the required documents are incomplete or are not postmarked by October 30th.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please send your completed Nomination Application via mail or email by October 31, 2023 to:

The Office of Congressman Andy Barr  
Attn: Stephen Marks  
2709 Old Rosebud Road, Suite 100  
Lexington, KY 40509

[Stephen.Marks@mail.house.gov](mailto:Stephen.Marks@mail.house.gov)