United States Senator Elizabeth Dole

2004-2005 Military Service Academy Nomination Packet

United States Senator Elizabeth Dole
310 New Bern Avenue, Suite 122
Raleigh, North Carolina 27601
Attention: Academy Coordinator
(919) 856-4630
alice_mccall@dole.senate.gov

Service Academy Nominations

Each year Senators have the privilege of nominating outstanding young people to attend our four United States Military Service Academies: the United States Air Force Academy, United States Merchant Marine Academy, United States Military Academy and United States Naval Academy. I am allotted a limited number of nominations, which I may submit for consideration of appointment (to be chosen by the academies) to fill vacancies at each academy. Because securing a nomination does not guarantee an appointment or an offer of admission, the entire process is extremely competitive.

Each applicant for a nomination from my office must meet the following eligibility requirements as of July 1, 2005:

- **Age**: Must be at least 17 years old, but not yet 23 years of age on July 1, 2005 (25th birthday for the Merchant Marine Academy).
- **Citizenship**: Must be a U.S. citizen, and a legal and permanent resident of North Carolina.
- **Marital Status**: Must be unmarried, not pregnant, and have no legal obligation to support children or other dependents.

In addition to applying to my office for a nomination, you must also complete and submit the requisite admissions application to your academy or academies of choice. I encourage you to begin your application process to the academies immediately. You can contact each academy by using the information listed below.

United States Air Force Academy
Director of Admissions
Colorado Springs, Colorado 80840
1-(800)-443-9266
www.usaf.af.mil

United States Military Academy
Admissions Office
West Point, New York 10996
1-(800)-822-ARMY
www.usma.edu

United States Merchant Marine Academy
Admissions Office
Kings Point, New York 11024
1-(800)-732-6267
www.usmma.edu

United States Naval Academy
Director of Candidate Guidance
Annapolis, Maryland 21402-5019
1-(800)-249-7707
www.usna.edu

The United States Coast Guard Academy does not require congressional nominations. If you are interested in attending the USCG Academy, you should contact the Academy directly at USCGA, Admissions Office, New London, Connecticut 06320 (www.cga.edu) or by calling 1-(800)-883-8724.

My office requires the following information to evaluate your request for nomination:

- **Completed U.S. Military Service Academy Nomination Application** from Office of U.S. Senator Elizabeth Dole.

- **Essay** – Essay, 200 words or less, answering questions on application form (must be typed or printed).

- **Two Evaluation Forms** – Completed and sealed (with signature over envelope flap) Teacher/Coach and Counselor/Principal Evaluation Forms (included in academy nomination application).

- **Academic Information**

  - **Sealed official transcript** -- (from all high schools, junior colleges, or colleges you have attended prior to October 31, 2004).

  - **Class Rank** -- (this information must be on your transcript)

  - **SAT/ACT Scores** – if transcript does not include a copy of official SAT/ACT scores, please forward your scores from the testing service using the following codes: **SAT: 5299 and ACT: 7166.**

It is the responsibility of each applicant to make sure that their Military Service Academy nomination packet is complete before it is submitted to Senator Dole's office. No incomplete packets will be considered. All complete packets must be postmarked no later than October 31, 2004 and <u>mailed</u> to:

Senator Elizabeth Dole
310 New Bern Avenue, Suite 122
Raleigh, North Carolina 27601
Attention: Academy Coordinator

Questions? Please contact Mrs. Alice McCall at (919) 856-4630

Please Attach
Photo Here

UNITED STATES SENATOR ELIZABETH DOLE
Military Service Academy Nomination Application

I. Personal Information:

Name:_____
(Last) (First) (Middle)

Date of Birth:_____ Social Security Number:_____

Permanent North Carolina Address:_____
(Street) (City/Town) (Zip Code)

Temporary Address (if applicable):_____
(Street) (City/Town) (Zip Code)

County of Residence:_____ Home Phone Number:_____

E-Mail Address:_____ Are you a U.S. Citizen? Y / N

Name of Parent(s) or Legal Guardian:_____

Mother's Work Number:_____ Father's Work Number:_____

School Attending:_____ H.S. Graduation Year:_____

Name of Guidance Counselor and Phone Number:_____

_____

II. Academy Preference:

Please rank the Academies to which you will accept a nomination in order of preference (1-4):

____ U.S. Air Force Academy ____ U.S. Merchant Marine Academy

____ U.S. Military Academy ____ U.S. Naval Academy

(If you do not mark an Academy you will not be considered for that academy)

Please fill in all other service academy nomination sources to which you are applying:

Member of Congress _____of the _____ District

Senator Edwards ____ President ____ Vice President ____ JROTC ____

III. Extra-curricular Activities:

____	Band/Orchestra	____	Debate Club
____	Student Body President	____	School Newspaper
____	Jr. ROTC Officer/Civil Air Patrol	____	Class President
____	Eagle Scout/Gold Award	____	Officer School Club
____	Boys/Girls State	____	Officer, Non-School Club
____	Class Officer	____	Student Body Officer
____	National Honor Society	____	Yearbook Editor

Other club participation: _____

_____

Part-time employment: _____

High School Athletic Participation:

Sport:	Varsity	Jr. Varsity	Club	Team Captain
Baseball/Softball	_____	_____	_____	_____
Basketball	_____	_____	_____	_____
Cheerleading	_____	_____	_____	_____
Crew	_____	_____	_____	_____
Cross Country	_____	_____	_____	_____
Fencing	_____	_____	_____	_____
Football	_____	_____	_____	_____
Golf	_____	_____	_____	_____
Gymnastics	_____	_____	_____	_____
Rifle	_____	_____	_____	_____
Soccer	_____	_____	_____	_____
Swimming	_____	_____	_____	_____
Tennis	_____	_____	_____	_____
Track and Field	_____	_____	_____	_____
Volleyball	_____	_____	_____	_____
Wrestling	_____	_____	_____	_____
Other Sport:				
_____	_____	_____	_____	_____

IV. Essay:

On a separate piece of paper, write an essay, 200 words or less, answering the following questions:

*Why are you seeking a nomination?

*Why do you feel you are qualified?

*Why do you want to be commissioned?

V. Evaluation Forms:

Have a teacher/coach complete the enclosed evaluation form with their signature across envelope flap.

Have a counselor/principal complete the enclosed evaluation form with their signature across envelope flap.

(Evaluation forms from family members are not permitted)

VI. Academic:

Mail a sealed official transcript from all high schools , junior colleges, or colleges you have attended prior to October 31, 2004. The high school transcript must include your class rank.

Official SAT (score code: 5299) or ACT (score code: 7166) scores if they are not noted on your official academic transcript.

VII. Signature:

THE INFORMATION ON THIS FORM AND ANY ATTACHEMENTS/ENCLOSURES TO IT ARE TRUE, COMPLETE, AND CORRECT TO THE BEST OF MY KNOWLEDGE. I AM A UNITED STATES CITIZEN, OR WILL BE ON OR BEFORE JULY 1, 2005; I AM AT LEAST 17 BUT NOT YET 23 YEARS OF AGE ON JULY 1, 2005; UNMARRIED; NOT PREGNANT; NO CHILD SUPPORT OBLIGATION; AND A LEGAL AND PERMANENT RESIDENT OF THE STATE OF NORTH CAROLINA.

I UNDERSTAND THAT THE DEADLINE FOR APPLICATIONS IS OCTOBER 31, 2004. IF I HAVE NOT SUBMITTED ALL REQUESTED INFORMATION POSTMARKED BY THIS DEADLINE, I UNDERSTAND THAT MY APPLICATION WILL NOT BE GIVEN CONSIDERATION.

_____ _____

Signature **Date**

Completed U.S. Military Service Academy packets must be postmarked no later than October 31, 2004 and mailed to:

Senator Elizabeth Dole
310 New Bern Avenue, Suite 122
Raleigh, North Carolina 27601
Attention: Academy Coordinator

United States Senator Elizabeth Dole
U.S. Military Service Academy Nomination
Applicant Checklist

1._____ **Application Form** – Complete application form and attach a photograph.

2._____ **Essay** – Send in essay, 200 words or less, answering questions on application form (must be typed or printed).

3._____ **Two Evaluation Forms** – Send in completed and sealed (with signature over envelope flap) Teacher/Coach and Counselor/Principal Evaluation Forms.

4._____ **Academic**

_____ **Sealed official transcript** (from all high schools, junior colleges, or colleges you have attended prior to October 31, 2004).

_____ **Class Rank** (this information must be on your transcript).

_____ **SAT/ACT Scores** -- If transcript does not include a copy of official SAT/ACT scores, please forward your scores from the testing service using the following codes: SAT: 5299 and ACT: 7166.

5._____ **Deadline – COMPLETE U.S. MILITARY SERVICE ACADEMY PACKETS MUST BE POSTMARKED NO LATER THAN OCTOBER 31, 2004. NO EXCEPTIONS.**

Mail all completed packets to:

Senator Elizabeth Dole
310 New Bern Avenue, Suite 122
Raleigh, North Carolina 27601
Attention: Academy Coordinator

Questions? Please contact Mrs. Alice McCall at (919) 856-4630
or by e-mail at alice_mccall @dole.senate.gov.

United States Senator Elizabeth Dole
U.S. Military Service Academy Nomination Form
TEACHER/COACH EVALUATION

Name of Applicant:_____
Last First Middle

1. How long have you known the applicant and in what capacity?

2. Tell us about the applicant's talents or strengths.

3. What do you consider the applicant's weaknesses?

4. Please describe the applicant's leadership characteristics?

5. How does the applicant handle stressful situations?

6. Do you know of any personal circumstances that might affect the applicant's performance at the academy?

7. Please rank the applicant among his/her peer group:

_____ Excellent, among the best I have known _____ Very Good, stands out in peer group

_____ Average _____ Below Average

8. General Comments, Evaluation and/or Recommendation (please use additional sheets if necessary):

Print or Type Name_____Title_____

Name of School and Address_____

Date_____ Phone Number_____

Signature_____

Please place evaluation form in envelope with your signature written across the flap and return to the applicant.

Thank you for taking the time to complete this evaluation form.

United States Senator Elizabeth Dole
U.S. Military Service Academy Nomination Form
COUNSELOR/PRINCIPAL EVALUATION

Name of Applicant:_____
Last First Middle

1. How long have you known the applicant and in what capacity?

2. Tell us about the applicant's talents or strengths.

3. What do you consider the applicant's weaknesses?

4. Please describe the applicant's leadership characteristics?

5. How does the applicant handle stressful situations?

6. Do you know of any personal circumstances that might affect the applicant's performance at the academy?

7. Please rank the applicant among his/her peer group:

_____ Excellent, among the best I have known _____ Very Good, stands out in peer group

_____ Average _____ Below Average

8. General Comments, Evaluation and/or Recommendation (please use additional sheets if necessary):

Print or Type Name_____Title_____

Name of School and Address_____

Date_____ Phone Number_____

Signature_____

Please place evaluation form in envelope with your signature written across the flap and return to the applicant.

Thank you for taking the time to complete this evaluation form.