Application for Nomination to United States Service Academy 
Class of 2025

Congressman Larry Bucshon, MD
20 NW 3rd Street, Suite 800
Evansville, IN 47708
Phone: (812) 465-6484
Email: Erin.Lucas@mail.house.gov

Please complete and return this form by Friday, October 2, 2020. Type or print neatly in black ink. Fill out all information completely. Any missing information may adversely affect your chances for nomination.

PERSONAL INFORMATION:
Full Name (Last, First, Middle): ____________________________ Today's Date: ______
Date of Birth: ____________________________ Place of Birth: ____________________________
Name of Parents: __________________________________________
Permanent Mailing Address: __________________________________________
City: ____________________________ County: ____________ State: ____________ Zip: ______
Phone Number: ____________________________ Email: ____________________________
Temporary Address (If different from above): ____________________________
Last 4 Digits of Social Security Number: ____________________________
Are you a United States citizen? (Please circle one) Yes / No

SCHOOL INFORMATION:
High School: __________________________________________
School Address: __________________________________________
School Principal or Academic Dean: ____________________________
Date of Graduation: __________________________________________
Name and Address of Colleges Attended (if applicable): ____________________________
ACADEMIC HISTORY AND ACCOMPLISHMENTS:

Latest cumulative grade point average: ____________________________ on a scale of: ____________________________

Rank in class: _________________ in a class of: ____________ (#of students) as of _____________ (date)

SAT Scores:

Verbal: ___________ Math: ___________ Writing: ___________ Date Taken: ___________

ACT Scores:

Math: ___________ Reading: ___________ Science: ___________ Writing: ___________

Composite: __________________________ Date Taken: __________________________

You do not need to take both tests, but you must provide official copies of either SAT or ACT scores. The above test scores, student rank, and GPA must be listed on your transcripts or certified by a Counselor or Principal.

AWARDS AND HONORS: Please answer all questions completely (You may attach resume or use another sheet of paper if necessary):

__________________________________________

__________________________________________

SCHOOL-RELATED EXTRACURRICULAR ACTIVITIES: (Please indicate years of participation. You may attach resume or use another sheet of paper if necessary):

__________________________________________

__________________________________________

COMMUNITY ACTIVITIES: (Please indicate duration and hours per week. You may attach resume or use another sheet of paper if necessary):

__________________________________________

__________________________________________

WORK EXPERIENCE: (Please indicate duration and hours per week. You may attach resume or use another sheet of paper if necessary):

__________________________________________

__________________________________________

MILITARY EXPERIENCE (e.g. JROTC or Civil Air Patrol. You may attach resume or use another sheet of paper if necessary):

__________________________________________

__________________________________________

__________________________________________
ESSAY:

In 300 words or less, on a separate sheet, describe why you wish to attend a service academy.

ACADEMY INFORMATION:
(Rank academies, for which you submitted an application, 1-4 according to your preference)

U.S. Naval Academy: ________________ U.S. Military Academy (West Point): ________________

An appointment to the Service Academies is based on a desire by the candidate to devote a lifetime of military service and implies recognition by the appointee of an obligation to the government to devote him/herself to a military career.
Are you interested in an appointment on those bases? (Please circle one) Yes / No

I certify that I am a legal resident of the state of Indiana and of the 8th Congressional District. If I have not submitted all the necessary data to the Office of Congressman Larry Bucshon by October 2, 2020, I understand that my application may not be considered for a nomination.

Signature: ___________________________ Date: ___________________________

Please return this application and all additional documents no later than Friday, October 2, 2020 to:

Congressman Larry Bucshon, MD
Attn: Service Academy Coordinator
20 NW 3rd Street, Suite 800
Evansville, IN 47708
or email a PDF to
Erin.Lucas@mail.house.gov