

Congressman Rob Bresnahan, Jr.

Nomination Overview for Service Academies

Applicant's Personal Data

Full Legal Name: _____
Date of Birth: _____ Place of Birth: _____ US Citizen? ____
High School: _____ Graduation Year: _____
Father's Full Name: _____ Military Service? _____
Mother's Full Name: _____ Military Service? _____

Academic Data

GPA: _____ Class Rank: _____ of _____ Class Percentage: _____
SAT Scores: Math - _____ ACT Scores: English - _____
Verbal - _____ Math - _____
Writing - _____ Reading - _____
COMPOSITE - _____ Science - _____
Writing - _____
COMPOSITE - _____

Most Recent Testing Date: _____ Most Recent Testing Date: _____

Leadership Data (Indicate school years participated, **1=Freshman, 2=Sophomore, 3=Junior, 4=Senior**)

1	2	3	4		1	2	3	4	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	National Honor Society	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	STEM Program
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Class President/Officer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Foreign Language
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Student Government Pres/Officer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Keystone State Award
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	School Club Pres/Officer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Debate Club
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Academic Honors Club	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Academy Summer Program
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	School Band/Chorus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Musical Instrument
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	School Newspaper/Yearbook	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Civil Air Patrol
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Boys'/Girls' State/Nation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Civic Organizations
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Junior ROTC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visited a Service Academy

Eagle Scout/Gold Award/Keystone State Award _____

Sports Data (Indicate school years participated as above, **P = Participated, L = Leadership Position**)

1	2	3	4		1	2	3	4		1	2	3	4	
				Football					Swimming					Track/XC
				Field Hockey					Gymnastics					Lacrosse
				Baseball					Volleyball					Tennis
				Basketball					Wrestling					Golf
				Soccer					Other (Specify)					

Academy Preference (Rank for which you submitted an application 1-4 according to your preference)

United States Military Academy ____ United States Air Force Academy ____
United States Naval Academy ____ United States Merchant Marine Academy ____

I, the undersigned candidate, am a legal resident of the 8th Congressional District of Pennsylvania, and I declare that the information I have provided in this form and any attached documents as necessary is true, correct and complete to the best of my knowledge and belief.

Applicant Signature: _____ Date: _____