2022 APPLICATION FOR NOMINATION TO A UNITED STATES SERVICE ACADEMY

Congressman Ted Budd
128 Peachtree Lane, Suite A
Advance, NC 27006
(336) 998-1313

Thank you for your interest in an appointment to one of the United States Service Academies. Please complete this application and return it with the required attachments by October 31, 2022 to the address above.

NOTE: To be considered for an academy nomination, you must be a United States citizen, at least 17 and not yet 23 years of age on July 1 of your year of admission. You must not be married, pregnant, or have a legal obligation to support a child or children. Also you must be a resident of the 13th Congressional District of North Carolina.

I. Personal Data

Full Name ________________________________________________

Preferred Name ____________________________________________

Permanent Local Address
__________________________________________

County________________________

Temporary Address (if applicable)
__________________________________________

County________________________

Telephone Number ______________________________

Cell Phone Number (optional) __________________________

Email Address ___________________________________________

Parent(s)/ Guardian(s) Name(s) and telephone number

__________________________________________

Date and Place of Birth ____________________________

Social Security Number (last four digits) ______ Are you a U.S. citizen?  Yes  No

Are you a resident of the 13th District of North Carolina?  Yes  No
II. Academy Preference

I wish to be considered for the following Service Academy(s): List in order of preference if more than one academy.

1. ___________________________  2. ___________________________
3. ___________________________  4. ___________________________

Why do you wish to attend a U.S. Service Academy? (Please feel free to use additional paper if necessary).

________________________________________________________________________
If you are now in military service, give branch, rank, and length of service.

________________________________________________________________________

Have you applied for a nomination with any other U.S. Representative or Senator? If so, please list their name(s).

________________________________________________________________________

III. Medical Information

Do you have any medical problems that you are currently being treated for?

________________________________________________________________________

Are you currently on any prescribed medications?

________________________________________________________________________

Is your eyesight 20/20 uncorrected?   Yes   No

If not, what is your eyesight uncorrected?
Right Eye ___/___  Left Eye ___/___

Do your eyes correct to 20/20 with contacts or glasses?   Yes   No   N/A

IV. Academic Data

Name of High School ____________________________________________

High School Counselor and phone number ____________________________

________________________________________________________________________

Class Rank ______________________  In a class of ______________

Graduation Date ______________

Approximate Grade-Point Average ______________
SAT Scores: Math__________ or ACT Scores: Math__________

Critical Reading__________ Verbal__________

Writing__________

I plan to take/retake the SAT/ACT on ____________ (date)

V. Personal Information

Have you ever been charged with or convicted of a felony? Yes No

If yes, please explain in detail on a separate sheet of paper.

Are you being recruited by one of the service academies for athletics? If yes, please list below:


Hometown Newspaper __________________________________________

VI. Please attach the following to your application:

1. List your extracurricular activities, hobbies, honors, awards, and work experience.
2. Include an official transcript of your academic record from your high school along with your SAT and/or ACT scores.
3. Include a copy of your Candidate Fitness Assessment scores.

VII. Signature

To the best of my knowledge, the information on this form and any attachment/enclosures is true, complete and correct. I understand that the deadline for application is October 31, 2022. If I have not submitted all requested information by this deadline, I understand that my application may not be given consideration.

____________________________________  ____________________
Signature                                      Date

If you have any questions, please call my Advance office at (336) 998-1313.