



U.S. Senator John Edwards
*Application for Nomination to
U.S. Military Services Academies*

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

Permanent Address: _____
(Number and Street) (City/Town)

(County) (State and Zip Code)

Temporary Address: _____
(Number and Street) (City/Town)

(County) (State and Zip Code)

Area Code and Home Telephone Number: _____

Date of Birth: _____ Social Security Number: _____

Name and Address of Parents: _____

Name and Address of Maternal Grandparents: _____

Name and Address of Paternal Grandparents: _____

Name and Address of High School: _____

Name of Principal: _____

If you have attended College, where: _____

Location of College: _____
(How Many Years) _____

School Telephone Number: _____ Graduation Date: _____

Indicate in Order of Preference:

- U.S. Military Academy U.S. Naval Academy
- U.S. Air Force Academy U.S. Merchant Marine Academy

(1) EXTRA CURRICULAR ACTIVITIES: (Indicate grade(s) for all that apply) *High School Only*

- Boys' State/Boys' Nation Eagle Scout School Band/Chorus
- Girls' State/Girls' Nation Boy Scout JR. ROTC Officer
- President of Student Govt Girl Scout JR. ROTC
- Other Student Govt Office Office, School Club Editor, School Pub
- President of Class Key Club Yearbook/Newspaper
- Other Class Office Language or Science Club Community Award (explain)
- Student Council Member Officer, Non-School Club Other (explain)
- National Honor Society Church Club
- Scholarship
- Academic Awards

(2) EMPLOYMENT: If you are employed, how many hours per week: _____

After School: _____ Summer: _____

Explanations: _____

(3) ATHLETIC PARTICIPATION: *High School Only*

SPORT	GRADE	VARSITY	POSITION	LETTERS	CAPTAIN	AWARDS, HONORS
_____	9, 10, 11, 12	_____	_____	_____	_____	_____
_____	9, 10, 11, 12	_____	_____	_____	_____	_____
_____	9, 10, 11, 12	_____	_____	_____	_____	_____
_____	9, 10, 11, 12	_____	_____	_____	_____	_____
_____	9, 10, 11, 12	_____	_____	_____	_____	_____

Check One (1) and Complete:

- Class Rank: _____ In a Class of _____
- I have taken the following test on the date indicated:
S.A.T. _____
Verbal _____ Math _____
Total _____
- Please attach a copy of your High School transcript

(4) MEDICAL

1. Is your eyesight 20/20 uncorrected? Yes _____ No _____
2. If not, what is your visual acuity uncorrected? Left eye: ___/___ Right eye ___/___
3. Do your eyes correct to 20/20 with glasses or contacts? Yes ___ No ___
4. Are you color blind? Yes ___ No ___
5. Do you anticipate any other medical problems: Yes ___ No ___
If yes, state nature: _____

(5) I am also seeking a nomination through _____
Senator Congressman Vice-Pres.

I have previously sought a nomination through:

(complete if applicable) _____

When: _____ Results: _____

PLEASE READ BEFORE SIGNING:

I have read the Information Sheet explaining nominating procedure and am familiar with his requirements. I CERTIFY THAT I AM A LEGAL RESIDENT OF THE STATE _____.
If I have not submitted all necessary data by the OCTOBER 31 deadline, I understand that I may not be given final consideration for a nomination.

In approximately 300 words or less, please state why you want to attend one of the U.S. Service Academies. Please attach essay to application.

Date _____ Signature _____

Mail transcripts, three letters of recommendation and complete applications to:

The Honorable John Edwards
United States Senate
Attention: Military Academy Applicants
301 Century Post Office Building
300 Fayetteville Street Mall
Raleigh, North Carolina 27601

ALL INFORMATION MUST BE RECEIVED BY OCTOBER 31st.