U.S. Congressman David B. McKinley, P.E.

First Congressional District
West Virginia

SERVICE ACADEMY NOMINATION APPLICATION
Academy Class of 2027

Privacy Act Statement: The submission of the requested information constitutes authorization for review of this information by Representative David B. McKinley, P.E., his staff and the Academy Admissions Office.
Please print clearly or type the following information:

1. Applicant Information

First Name:______________________  Middle Name: ________________________

Last Name and Suffix: ________________________________

Preferred Name/Nickname: ________________________________

Social Security Number: __________ - _______ - ________

Physical Address: ________________________________

Mailing Address: ________________________________

County of Permanent Residence: ________________________________

Phone Number: ______ - _______ - ________

Alternate Phone Number: ______ - _______ - ________

Email Address: ________________________________

Gender: Male_________    Female _________

Date of Birth: __________/_________/__________

Will you be 17 but not yet 23 years of age by July 1 of the year you are admitted to the academy?

_____ Yes   ______ No

Mother's Name: _________________________________________________________________

Mother’s Phone: ______ - _______ - ____________

Father's Name: _______________________________________________________________

Father’s Phone: ______ - _______ - ____________

Legal Guardian (if applicable): ___________________________________________________

Legal Guardian’s Phone: ______ - _______ - ____________
Are you currently or have you ever been married?  _____ Yes  _____ No

Do you have any dependants?  _____ Yes  _____ No

Have you ever been arrested?  _____ Yes  _____ No

If so, please explain: ____________________________________________________
_______________________________________________________________

II. Academy Preferences

Please rank each of the Academies in your order of preference for attendance, with #1 being your first choice and “No” if you are not interested.  **Rank only the Academies to which you will be submitting applications and will attend if offered an appointment.**

U.S. Air Force Academy  -  1  2  3  4  No Interest

Have you opened a Preliminary Application?  Yes  No

U.S. Military Academy (West Point)  -  1  2  3  4  No Interest

Have you opened a Preliminary Application?  Yes  No

U.S. Naval Academy  -  1  2  3  4  No Interest

Have you opened a Preliminary Application?  Yes  No

U.S. Merchant Marine Academy  -  1  2  3  4  No Interest

Have you opened a Preliminary Application?  Yes  No

U.S. Coast Guard Academy  -  1  2  3  4  No Interest

Have you opened a Preliminary Application?  Yes  No

(Nominations are not required for admission to the Coast Guard Academy)

Are you seeking a nomination from any other source?  _____ Yes  _____ No

_______ President Joe Biden          ____  Vice President Kamala Harris
_______ U.S. Senator Shelley Moore Capito  ____  U.S. Senator Joe Manchin
_______ JROTC

*It is in your best interest to request a nomination through all sources available to you. If your father or mother is active-duty military, retired military, or was killed in action, you may be eligible for a Presidential or Vice Presidential nomination. Please consult the appropriate Service Academy for further information.*
Will you be a United States Citizen at the time of enrollment?  _____ Yes  _____ No

Are you a legal resident of the 1st Congressional District of WV?  _____ Yes  _____ No

Have you applied for a nomination in a previous year?  _____ Yes  _____ No

Have you been contacted directly by any Academy?  _____ Yes  _____ No

If yes, which Academy contacted you and who?  ____________________________________________

_________________________________________________________________________________

III. Academic Qualifications

High School: ________________________________________________________________

Telephone Number: ___________________________________________________________

Mailing Address: ______________________________________________________________

Principal: ___________________________________________________________________

Counselor: ____________________________________________________________________

Graduation Year: ____________

Test Scores:
(Include high school transcript and ACT/SAT results)

SAT Scores:  Math: _____  Verbal: _____  Writing: _____  Composite: _____

ACT Scores:

ACT English ________  ACT Math _________

ACT Reading _______  ACT Science/Reasoning ________

ACT Plus Writing _______ (required by USMA)

Composite Score ________

Are you scheduled to re-take any of your tests?  ______________  Date(s) _____________
High School Class Rank ________________ out of ___________________ class size.  
(*If your school does not rank, please estimate*)

Class Percentile:  Top 1%  5%  10%  25%  50%

Grade Point Average (GPA): ________________________  Grade Scale Used: ____________

*Grade Point Average, Scale, Class Rank and Size should be included on your high school transcript.*

Advanced Placement Courses Taken and AP Score:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Academic Awards or Special Achievements:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

*Submit college entrance examination board scores - ACT and/or SAT and High School/College transcripts.  ACT/SAT scores reported on your official certified transcript are acceptable.*

College Attended (if applicable): ___________________________________________________

Mailing Address: ________________________________________________________________

Major: _________________________________  Years Attended: ________________________

Hours Completed: _____________________  GPA: ________________________________

List any additional comments concerning your transcript or test scores you want to share with the interview panel:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________
### IV. Athletic Activities

*(Grades 9-12) and college - if applicable*

<table>
<thead>
<tr>
<th>Sport</th>
<th>Years in Sport</th>
<th>Awards/ Special Recognition</th>
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</table>

Have you been in contact with athletic coaches at any Academy?  

_____ Yes_____ No

If so, explain:

<table>
<thead>
<tr>
<th>Academy</th>
<th>Sport</th>
<th>Coach/Contact Name</th>
<th>Telephone Number</th>
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V. Non-Athletic Activities

<table>
<thead>
<tr>
<th>Have you been</th>
<th>Number of years - grades 9-12</th>
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<tbody>
<tr>
<td>Class President</td>
<td>____________________________</td>
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<tr>
<td>Class Officer</td>
<td>____________________________</td>
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<tr>
<td>Student Body Officer</td>
<td>____________________________</td>
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<tr>
<td>JROTC Detachment Commander</td>
<td>____________________________</td>
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<tr>
<td>JROTC Member</td>
<td>____________________________</td>
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<tr>
<td>Officer of a School Club</td>
<td>____________________________</td>
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<tr>
<td>Boys/Girls State</td>
<td>____________________________</td>
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<tr>
<td>Boys/Girls Nation</td>
<td>____________________________</td>
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<td>National Honor Society</td>
<td>____________________________</td>
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<td>Eagle Scout/Gold Award</td>
<td>____________________________</td>
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<tr>
<td>Boy/Girl Scout Member</td>
<td>____________________________</td>
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<tr>
<td>Civil Air Patrol Member</td>
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<tr>
<td>Civil Air Patrol Detachment Officer</td>
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<tr>
<td>4-H/FFA Member</td>
<td>____________________________</td>
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<td>4-H/FFA Club Officer</td>
<td>____________________________</td>
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<td>Other Officer Non-School Club</td>
<td>____________________________</td>
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<td>Editor School Publication</td>
<td>____________________________</td>
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<td>Drama/Speech/Debate Club Member</td>
<td>____________________________</td>
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<td>School Band/Chorus (specify)</td>
<td>____________________________</td>
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<tr>
<td>Other</td>
<td>____________________________</td>
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List other non-athletic extracurricular activities and leadership positions:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Non-athletic awards or special achievements:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

______________________________________________________________________________
VI. Prior Military Service

Have you had any prior service with the military?  Yes____  No____

_____Active  _____Guard  _____Reserve

Branch: __________________________   Years: ______________

Highest Rank: ______________   Discharge Code: ______________

Has a parent, grandparent or sibling attended a Service Academy?  ____ Yes  ____ No

(If yes, please list)

<table>
<thead>
<tr>
<th>Name</th>
<th>Service Academy</th>
<th>Year of Graduation</th>
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VII. Employment History

Reverse chronological order: use additional sheets if necessary.

<table>
<thead>
<tr>
<th>Employer</th>
<th>Dates</th>
<th>Position</th>
<th>Hrs. per week worked</th>
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Motivation for working:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
VIII. Ethics

In two hundred words or less, describe how you handled a difficult ethical choice you have had to make or a situation that tested your integrity. (Please type or print clearly on a separate page).

IX. Essay

In five hundred words or less, explain why you want to attend a Service Academy. (Please type or print clearly on a separate page).

X. Other information you would like Congressman McKinley and the interview panel to know.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Do I have your permission to use your name in a press release?

Yes____  No _____

Name of hometown newspaper _______________________________________________
CONGRESSMAN
DAVID B. MCKINLEY, P.E.
1ST Congressional District of West Virginia

AFFIDAVIT OF DOMICILE

THIS FORM IS TO BE COMPLETED BY THE PARENT OR LEGAL GUARDIAN OF THE INDIVIDUAL SEEKING MY NOMINATION TO A UNITED STATES SERVICE ACADEMY. IF YOU ARE NOT A MINOR (UNDER 18 YEARS OF AGE), YOU MAY ALSO COMPLETE THE FORM.

This statement establishes that the applicant or his/her parent or guardian is domiciled in the State of West Virginia. Domicile is defined as a person’s fixed, permanent and principal home for legal purposes.

I, ___________________________________________________, being of lawful age (18) and a resident (PARENT’S/GUARDIAN’S OR STUDENT’S NAME - 18 YEARS AND OLDER)
of_____________________________________, ________________________________, West Virginia, (CITY) (COUNTY)

Do on oath and under penalties of perjury, depose and say:

That I am the parent entitled to the custody of, or the legal guardian of___________________________, (NAME OF APPLICANT)
a minor, or I am the applicant who has reached the age of majority, who has applied to Congressman David B. McKinley, P.E. for consideration as a nominee to a U.S. Service Academy; that said individual is either my son/daughter and is my legal ward who lives with me or myself: and that our/my domicile is:

___________________________________________________________________________________

This is in evidence thereof, I depose and say that:
I am registered as a voter in _______________________, __________________________ _______ (CITY) (COUNTY) (STATE)

And I file income tax returns and pay income taxes to the State of ________________________________.

SIGNATURE: _____________________________________________ DATE: __________________
Service Academy Nomination Application Check-List

Just a Reminder!!

The following items need to be sent to my Morgantown District Office, 709 Beechurst Avenue, Suite 29, Morgantown, WV 26505 by 5:00 p.m. on November 1 of the year preceding your anticipated enrollment in order to complete your application for nomination to one of the United States Service Academies. If you have any questions or concerns during the nomination process, please contact Linda Wooldridge at (304) 284-8506 or (202) 731-9230.

____ Ten--page application packet

____ Current Photo

____ SAT/ACT Scores. NOTE: Also, the scores may be sent directly to my office or sent through your school guidance office.

____ Current High School Transcript - sent by your guidance office.

____ Class Rank - sent by your guidance office.

____ Essay - describing how you handled a difficult ethical choice you have had to make or a situation that tested your integrity.

____ Essay - explanation of why you want to attend a Service Academy.

____ Letters of Recommendation. Please submit a minimum of 3 recommendations.

Thank you for your willingness to serve our country.

Sincerely,

David B. McKinley, P.E.
Member of Congress
XI. Privacy Statement

I have read the Privacy Act Statement. The information provided in this application is true and correct to the best of my knowledge. I understand that in addition to this application, I am also required to submit all the items on the application checklist. I further understand that Congressman McKinley's Morgantown Office must be in receipt of all application materials no later than 5:00 p.m. November 1, 2022.

Signature:

___________________________________________________________________________

Print Signature:

___________________________________________________________________________

Date: _____________________________________________________________________

Please return your completed application to:

Congressman David B. McKinley, P.E.
709 Beechurst Avenue, Suite 29
Morgantown, WV 26505

Any questions should be directed to:

Linda Wooldridge
Director, Constituent Services
Academy Nominations Coordinator
(202) 731-9230 cell
linda.wooldridge@mail.house.gov