

— Office of Senator —

THAD COCHRAN



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UNITED STATES
SERVICE ACADEMY NOMINATIONS



REQUIREMENTS

Residency: Applicant must be a legal resident of Mississippi.

Application Form: The enclosed application, along with the additional required information, should be completed and returned. It is not necessary for you to send all information at one time. The application **must be signed and dated to be complete.**

Three Recommendation Letters: Choose a math or science teacher, coach, guidance counselor, principal, employer, etc. to write a recommendation letter. Each person writing a letter must place it in a sealed envelope, and sign his/her name across the seal.

Transcript: An official high school transcript, sealed by the school, is required. Your **FINAL** junior grades must be listed on the official transcript. If you are a college student, **FINAL** high school and college scores are required. The transcript must be in an envelope sealed by the school.

ACT/SAT Scores: An official copy of your ACT or SAT scores is required. If these scores are included on your transcript, you do not need to submit additional copies. You can also have your scores forwarded to my office directly from the testing center by using the following codes:
S.A.T. - 1110, A.C.T. - 7147.

Essay: In 500 words or less please explain your reasoning for wanting to attend a Service Academy.

Deadline: Send the above information to Jo Ann Clark in my Jackson Office at 190 East Capitol Street, Suite 550, Jackson, MS 39201. All information must be received in my office by **Monday, November 7, 2016.**

NOTE: It is your responsibility to confirm that the materials needed to complete your file have been received by my office. Please feel free to contact Jo Ann Clark in my Jackson office at 601-965-4459 any time to check on the status of your file.



APPLICATION FOR SERVICE ACADEMY NOMINATION

CONFIDENTIAL APPLICATION

This application must be completed and received no later than **Monday, November 7, 2016**, in order for you to be eligible for consideration. Please type or print.

Applicant Information

Last Name _____ First Name _____ Middle Name _____

Preferred Name: _____

Current Street Address _____

City _____ State _____ Zip Code _____

County _____

Home number _____ Cell Number _____

Email _____

Permanent Home Address/Record *(if different from Current Address)*

Address _____

City _____ State _____ Zip Code _____

County _____

(Out of state residents must have a Mississippi home of record.)

Social Security Number _____

Are you a United States citizen? Yes No

Are you a Mississippi resident? Yes No

Date of Birth _____ Age _____

Name of parent(s)/guardian(s) _____



Educational Institution

Name of current/most recent high school _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone _____

Counselor _____ Ext. _____

Dates of Attendance: From _____ To _____

Current year in school _____ Grade Point Avg. _____ Date of graduation _____

Former Educational Institutions

(list in order, beginning with most recent:)

School	Address	Dates Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Service Academies

(Indicate your choice for a nomination in order of preference:
with "1" being your first, "2" being your second, etc.)

Air Force Merchant Marine Military Naval

Have you requested a pre-candidate kit from an academy? _____

If so, which academy? _____

Have you applied for a service academy nomination from any other source? *(Please indicate below)*

President _____ Vice President _____

U. S. Senator _____

U. S. Representative _____

Secretary of _____ *(Active Duty Personnel)*

Additional Information:

Please type or print your answers to the following questions on a separate piece of paper or submit your résumé.

1. List school and community activities that you are involved in.

2. List any awards or honors you have received.

3. List your hobbies.

Signature (Required)

I affirm all of the information on this form and all attachments are accurate. I also affirm I am a United States citizen and a resident of the State of Mississippi.

SIGNATURE _____ DATE _____

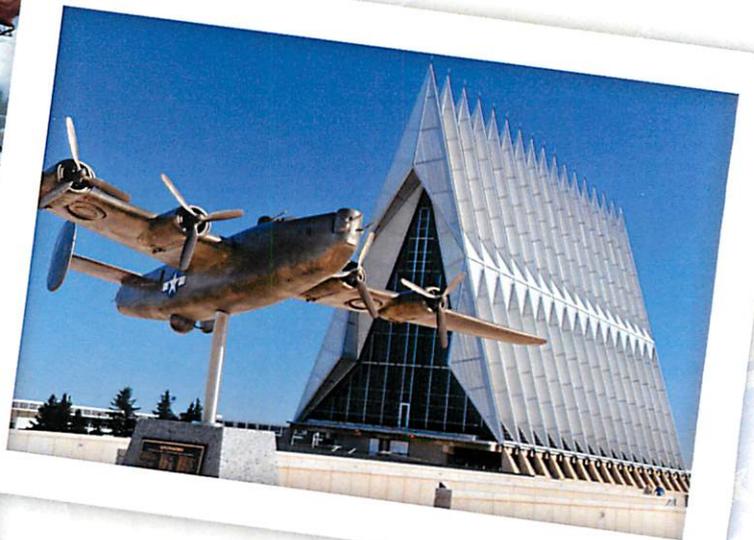
Please send completed application to:

Jo Ann Clark, Office of Senator Thad Cochran, 190 East Capitol Street, Suite 550, Jackson, MS 39201
601-965-4459 (Phone), 601-965-4919 (Fax)



Office of U.S. Senator Thad Cochran

2017 SERVICE ACADEMY NOMINATIONS



FACT SHEET

The academies provide guidelines for applicants who may be eligible to be considered for an appointment. For more information, you may contact the Academies at the addresses below:

U.S. Air Force Academy

Director of Admissions
2304 Cadet Drive
Colorado Springs, Colorado 80840
800-443-9266
www.academyadmissions.com



U.S. Naval Academy

Director of Candidate Guidance
117 Decatur Road
Annapolis, Maryland 21402-5018
410-293-4361
www.usna.edu/admissions



U.S. Military Academy

Director of Admissions
646 Swift Road
West Point, New York 10996-9902
845-938-4041
www.usma.edu



U.S. Merchant Marine Academy

Admissions Office
300 Steamboat Road
Kings Point, New York 11024
866-546-4778
www.usmma.edu



U.S. Coast Guard Academy

There are no Congressional nominations to this academy. You may call 800-883-8724 or write the Director of Admissions, USCG Academy, 31 Mohegan Avenue, New London, Connecticut 06320-8103, to obtain information or application forms. Their website is www.cga.edu.





OFFICE OF SENATOR THAD COCHRAN

190 East Capitol Street, Suite 550, Jackson, MS 39201

601-965-4459 (Phone), 601-965-4919 (Fax)

www.cochran.senate.gov