United States Service Academy Nomination Applicant Packet Checklist
Congressman Gus M. Bilirakis, Florida’s Twelfth Congressional District

_____ Applicant Form - complete application form, school or passport picture pasted in upper right corner of first page of application and copy of driver’s license pasted on signature page.

_____ Three Evaluation Forms – send in completed and sealed with signature over sealed envelope flap. (please do not send more than the three letters included, they will not be considered)

Academic:
_____ Sealed official transcript - from all high schools, junior colleges, or colleges you have attended
_____ Class rank - must be on your transcript. (if no class rank, have counselors estimate what your class rank would be, if possible)
_____ SAT/ACT Scores – if transcript does not include a copy of official SAT/ACT scores, please forward your scores from the testing service using the following code: SAT-5681 and ACT-7332

_____ Deadline – complete United States Service Academy application packet must be RECEIVED (not postmarked) by our New Port Richey office no later than October 30, 2020 4:00 p.m. No Exceptions. You can start sending in paperwork earlier than that date and we will open a file. Mail/hand deliver completed application to:

Congressman Gus M. Bilirakis
Attention: Academy Nominations
7132 Little Road
New Port Richey, FL  34654
# Application for Nomination to the United States Service Academies
## Congressman Gus M. Bilirakis, Florida’s Twelfth Congressional District
7132 Little Road, New Port Richey, FL 34654 Ph: 727-232-2921

## I. Personal Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: (Last, First, Middle)</td>
<td>___________</td>
</tr>
<tr>
<td>Preferred Name (if different than above):</td>
<td>___________</td>
</tr>
<tr>
<td>Date of Birth: (mm/dd/yyyy)</td>
<td>___________</td>
</tr>
<tr>
<td>Social Security #</td>
<td>___________</td>
</tr>
<tr>
<td>Permanent Address:</td>
<td>___________</td>
</tr>
<tr>
<td>(street) (apartment)</td>
<td>___________</td>
</tr>
<tr>
<td>(city, state, zip) (county)</td>
<td>___________</td>
</tr>
<tr>
<td>Phone: (home) ___(cell)</td>
<td>___________</td>
</tr>
<tr>
<td>Email Address:</td>
<td>___________</td>
</tr>
</tbody>
</table>

Attach Headshot Here
Please paste it to the paper.

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
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</thead>
<tbody>
<tr>
<td>Temporary Address (if applicable):</td>
<td>___________</td>
</tr>
<tr>
<td>(street) (apartment)</td>
<td>___________</td>
</tr>
<tr>
<td>(city, state, zip) (county)</td>
<td>___________</td>
</tr>
</tbody>
</table>

Are you a United States Citizen? *(please circle)* Y / N

Are your parents legal residents of the Twelfth Congressional District of Florida? *(please circle)* Y / N

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
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</thead>
<tbody>
<tr>
<td>Father’s Name:</td>
<td>___________</td>
</tr>
<tr>
<td>Father’s Address:</td>
<td>___________</td>
</tr>
<tr>
<td>(street) (apartment)</td>
<td>___________</td>
</tr>
<tr>
<td>(city, state, zip) (county)</td>
<td>___________</td>
</tr>
<tr>
<td>Father’s Employer:</td>
<td>___________</td>
</tr>
<tr>
<td>Work Number:</td>
<td>___________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother’s Name:</td>
<td>___________</td>
</tr>
<tr>
<td>Mother’s Address:</td>
<td>___________</td>
</tr>
<tr>
<td>(street) (apartment)</td>
<td>___________</td>
</tr>
<tr>
<td>(city, state, zip) (county)</td>
<td>___________</td>
</tr>
<tr>
<td>Mother’s Employer:</td>
<td>___________</td>
</tr>
<tr>
<td>Work Number:</td>
<td>___________</td>
</tr>
</tbody>
</table>

Do you have any brothers and/or sisters? Y / N

If yes, please list their names and ages:

__________________________________________________________
__________________________________________________________
__________________________________________________________

Page 1
II. Academy Information

Please rank the Academies to which you will accept a nomination in order of preference (using 1-4):

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>3. Military Academy</td>
<td>4. Naval Academy</td>
</tr>
</tbody>
</table>

If you have not started application process with each academy at time of turning in this application, you will not be considered for that academy.

Have you ever applied for a Service Academy nomination to any source, Congressional or otherwise, for a class entering prior to this year? (please circle) Y / N

If yes, what was the result?

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

If you have already applied to an academy, has a local admissions liaison been appointed to you yet? If so, please list their name and academy represented.

__________________________________________________________________________________
__________________________________________________________________________________

Please indicate all other Service Academy nomination sources to which you are applying:

_____ Sen Marco Rubio _____ Sen Rick Scott _____ JROTC _____ President _____ Vice President
_____ Another U.S. House of Representative’s office: ________________________________

If you are now in the military service, please provide the following information:

Branch of Service: _________________________________________________________________

Rank: __________________________________________________________________________

Length of Service: __________________________________________________________________
III. High School/College Information

High School: ________________________________________________________________

Address: ______________________________________________________________________

Phone Number: __________________________ Graduation Year: _________________________

What is your class rank? ___________________________ Total Class Size: __________________
(if no class rank, have counselor or principal estimate your place)

College or Prep School Attended (if applicable) _______________________________________


Honors Classes (please circle) Y / N AP Classes Y/N IB Program: Y/N

SAT/ACT Scores: Please include official scores with this application or no interview will be scheduled
Qualifying scores must be in by the application deadline or no interview will be scheduled

I plan to take/retake the SAT/ACT on____________

List any academic honor societies to which you belong?

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

List schools that you are applying to:

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

Page 3
IV. Extracurricular Activities - DO NOT ATTACH SEPARATE RESUME

List any significant offices you have held since entering ninth grade:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

In what non-athletic, extracurricular activities have you participated in since entering ninth grade?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

List any non-athletic awards, achievements, prizes, or accomplishments not listed above:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

List any non-varsity organized sports in which you have participated in since entering ninth grade:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

List any sports in which you participated as a member of a varsity team and any letters received:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

List any athletic awards or special recognition you have received:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

List your primary interests, hobbies, employment:
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
V. Essay
Below three items to be included as one document. Please limit word count to no less than 750 words and no more than 1,000 using Times New Roman, 12 point, double space. Each paragraph should begin with a topic sentence, listed below:

1. Why do you want to attend a United States Service Academy?
2. Why do you believe you are qualified to be nominated?
3. Write a brief character sketch of yourself. Include basic attributes and those qualities that you believe are your strengths.

VI. Evaluation Forms
Have a principal/counselor, teacher/coach or other adult (personal) who is not related to you complete the enclosed evaluation forms and return to our office before the deadline.
Do not send extra letters other than the three included with this application. Additional letters will not be part of the file that the panel reviews.

PLEASE READ CAREFULLY BEFORE SIGNING

I have read the information contained in this packet explaining the nomination process of Congressman Bilirakis.

I understand the Congressman’s requirements, including the requirement of a panel interview, if eligible. I am also aware of the application deadline of October 30, 2020.

I certify that I am a legal resident of the Twelfth Congressional District of Florida. Go to http://www.house.gov/htbin/findrep to make sure you reside in the 12th district

There is no known reason I should not be medically qualified to receive an appointment to a service academy, if nominated.

____________________________________  __________________________
Signature                                      Date

Paste copy of driver’s license here
Counselor / Principal Evaluation

The person (applicant) who has asked you for a recommendation is applying to my office for a nomination to a United States Service Academy. The purpose of the Academies is to provide a college education leading to a career as a military officer. The answers you give will be used in the selection process. Please place the completed evaluation form in a sealed envelope, sign your name across the flap and return to the applicant. Thank you for taking the time to complete this form.

Name of Applicant: (Last, First, Middle) _________________________________________________

How long have you known the applicant and in what capacity?
__________________________________________________________________________________
__________________________________________________________________________________

What do you consider the applicant’s talents or strengths with regard to leadership potential?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

What do you consider the applicant’s weaknesses to be?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

In your opinion, would the applicant be able to effectively manage taking orders from superior officers?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

In your opinion, does the applicant show good character, moral values, and provide a good role model for younger students? ________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Name/Title_________________________________________ PLEASE PRINT IN BLACK INK
Signature_____________________________________________ Date _____________________

Page 6
Teacher / Coach Recommendation

The person (applicant) who has asked you for a recommendation is applying to my office for a nomination to a United States Service Academy. The purpose of the Academies is to provide a college education leading to a career as a military officer. The answers you give will be used in the selection process. **Please place the completed evaluation form in a sealed envelope, sign your name across the flap and return to the applicant. Thank you for taking the time to complete this form.**

Name of Applicant: (Last, First, Middle) _________________________________________________

How long have you known the applicant and in what capacity?
__________________________________________________________________________________

What do you consider the applicant’s talents or strengths with regard to leadership potential?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

What do you consider the applicant’s weaknesses to be?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

In your opinion, would the applicant be able to effectively manage taking orders from superior officers?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

In your opinion, does the applicant show good character, moral values, and provide a good role model for younger students? ____________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

Name/Title_________________________________________ PLEASE PRINT IN BLACK INK

Signature_____________________________________________ Date _____________________
United States Service Academy Nomination
Congressman Gus Bilirakis FL-12

Personal Evaluation
The person (applicant) who has asked you for a recommendation is applying to my office for a nomination to a United States Service Academy. The purpose of the Academies is to provide a college education leading to a career as a military officer. The answers you give will be used in the selection process. Please place the completed evaluation form in a sealed envelope, sign your name across the flap and return to the applicant. Thank you for taking the time to complete this form.

Name of Applicant: (Last, First, Middle) ________________________________________________

How long have you known the applicant and in what capacity?
__________________________________________________________________________________
__________________________________________________________________________________

What do you consider the applicant’s talents or strengths with regard to leadership potential?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

What do you consider the applicant’s weaknesses to be?
__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________

In your opinion, would the applicant be able to effectively manage taking orders from superior officers?
__________________________________________________________________________________
__________________________________________________________________________________

In your opinion, does the applicant show good character, moral values, and provide a good role model for younger students? ______________________________________________________
__________________________________________________________________________________

__________________________________________________________________________________

Name/Title_________________________________________ PLEASE PRINT IN BLACK INK
Signature_____________________________________________ Date _____________________

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