



Application for Nomination to the United States Service Academies

U.S. Senator Rand Paul

Application Checklist

To ensure proper completion of your packet, please return the following items no later than **November 15, 2014**.
All information should be returned in one complete mailing.

1. Signed **Application Checklist** (This Page)
2. Completed **Application Form** (See Attached)
3. **2 Recommendation Forms** required from the following sources: (See Attached)
 - a. High School Counselor or Principal
 - b. High School Teacher or Coach
4. **Extracurricular Form** (See Attached)
5. **Personal letter** to Senator Paul stating why you want to attend a service academy
6. **Official Academic Transcript**. Please ensure that the transcript includes your **current GPA and Class Rank** to include total number in class. If your school does not rank students, please have your Guidance Counselor contact my Academy Coordinator at (270) 782-8303.
7. Copies of **ACT and/or SAT test scores**

*Failure to complete these requirements by **November 15th** (with the exception of test scores) will disqualify you from further consideration. Please be sure you are a current and legal resident of the State of Kentucky or your application will be invalid with this office and the academy. For questions please call 270-782-8303.*

Please send your completed Academy Nomination packet to:

**U.S. Senator Rand Paul
Attn: Academy Coordinator
1029 State Street
Bowling Green, KY 42101**

If you have any questions, please contact my Academy Coordinator at (270) 782-8303.

Authorization for Release of Information

If I am selected for a nomination, I authorize Senator Paul to release my name as a nominee in press releases.

SIGNATURE (student): _____

DATE: _____

SIGNATURE (parent/guardian): _____

DATE: _____



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Application Form

Personal Information:

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

Mailing Address: _____
(Street Address)

(City) (State) (Zip) (County)

Father's Name: _____ Mother's Name: _____

Permanent Address: _____
(If different from above) (Street Address)

(City) (State) (Zip) (County)

Phone #: (____) _____ Cell #: (____) _____

E-Mail Address: _____

SSN: _____ DOB: ____/____/____ Gender: M / F

High School: _____ Date of Graduation: _____

In order for Senator Paul to nominate to any Service Academy, you must have already made application directly with each Service Academy/ies of interest.

Confirm **ACADEMY CHOICES** for which you have **made application** (list in order of preference):

___ AIR FORCE ACADEMY (COLORADO SPRINGS) ___ NAVAL ACADEMY (ANNAPOLIS) ___ MERCHANT MARINE (KINGS POINT) ___ MILITARY ACADEMY (WEST POINT)

A nomination through any authority does not guarantee acceptance into a service academy. Final acceptance into one of the U.S. Service Academies is made by the individual Academy.

Confirm **NOMINATION SOURCES** for which you have made application:

Congressman _____ Senator McConnell Vice- President President JROTC

NOTE: It is recommended you that you apply with all applicable sources.



Application for Nomination to the United States Service Academies

U.S. Senator Rand Paul

Recommendation Form: Counselor/Principal

Applicant's Name: _____ **Class Rank:** _____ **out of** _____ **# of students**

The person named above is applying for a nomination to a United States Service Academy through Senator Paul's office. We understand that your time is valuable and we appreciate your help in our selection process. The academies provide a college education and training for students to become a Commissioned Officer in the Armed Forces. The questions below are designed to provide the information necessary to select the best qualified candidates. Each student evaluation must be received in our office by **November 15, 2014**. Please assist the student in meeting this deadline. Additional pages will be accepted, but are not required.

1. How long have you known the applicant and in what capacity?
2. Describe the applicant's talents, strengths, and leadership qualities.
3. What are the applicant's weaknesses?
4. How does the applicant handle stressful and challenging situations? Has the applicant encountered failure and how did he/she manage the situation?
5. Describe the applicant's relationship with his/her peer group? Does he/she stand out among peers? Does he/she have the ability to get along well with others?

GENERAL COMMENTS, EVALUATION, and/or RECOMMENDATION:

To the Counselor/Principal: Please return this completed form in a sealed envelope with your signature across the flap to the applicant for inclusion in his/her application packet. Please do not mail this form separately. Thank you again for your time.

PRINT NAME: _____

DATE: _____

SIGNATURE: _____

PHONE NUMBER: _____

TITLE: _____



Application for Nomination to the United States Service Academies

U.S. Senator Rand Paul

Recommendation Form: Teacher/Coach

Applicant's Name: _____

The person named above is applying for a nomination to a United States Service Academy through Senator Paul's office. We understand that your time is valuable and we appreciate your help in our selection process. The academies provide a college education and training for students to become a Commissioned Officer in the Armed Forces. The questions below are designed to provide the information necessary to select the best qualified candidates. Each student evaluation must be received in our office by **November 15, 2014**. Please assist the student in meeting this deadline. Additional pages will be accepted, but are not required.

1. How long have you known the applicant and in what capacity?
2. Describe the applicant's talents, strengths, and leadership qualities.
3. What are the applicant's weaknesses?
4. How does the applicant handle stressful and challenging situations? Has the applicant encountered failure and how did he/she manage the situation?
5. Describe the applicant's relationship with his/her peer group? Does he/she stand out among peers? Does he/she have the ability to get along well with others?

GENERAL COMMENTS, EVALUATION, and/or RECOMMENDATION:

To the Teacher/Coach: Please return this completed form in a sealed envelope with your signature across the flap to the applicant for inclusion in his/her application packet. Please do not mail this form separately. Thank you again for your time.

PRINT NAME: _____

DATE: _____

SIGNATURE: _____

PHONE NUMBER: _____

TITLE: _____



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Extracurricular Form

Applicant's Name: _____

Please answer the questions below using the space provided; attach additional sheets of paper if needed.

1. **Special awards and honors** for academic and non-academic activities, with dates.

2. **School and outside club memberships and activities**, noting leadership positions, with dates.

3. **Employment/Internship**, both after school and in summer, with hours per week and dates.

4. **Volunteer** involvement, with hours per week and dates.

5. **School athletics**, noting Captain, Varsity Letter, MVP, All-League, etc.