



## US Service Academy Nomination Applicant Checklist

*Congressman Greg Murphy, MD*  
*North Carolina Third District*

1. \_\_\_\_\_ **Application Form:** complete **typed** application form and attach photograph.  
(Handwritten applications will not be considered)
2. \_\_\_\_\_ **Two Recommendation Forms:** send in at least two typed recommendation forms or letters as directed, see pages 7 & 9.
3. \_\_\_\_\_ **Academic:**
  - \_\_\_\_\_ **Sealed official transcript:** (from all high schools, community colleges, or colleges you have attended prior to October 1, 2021.)
  - \_\_\_\_\_ **Class rank:** (must be on your transcript)
  - \_\_\_\_\_ **Official SAT and/or ACT Scores:** if your transcript does not include your SAT and/or ACT scores, please request that the testing service send an official copy of your scores to Congressman Murphy's office.
4. \_\_\_\_\_ **Deadline:** completed nomination application packet must be postmarked **no later than October 1, 2021**. No exceptions. Applications must be submitted as one complete package, individually submitted documents will not be considered.

Mail all required forms and information:

**Office of Congressman Murphy, MD**  
**2402 Dr. M.L.K. Jr Blvd**  
**New Bern, NC 28562**

The Office of Congressman Murphy recommends the applicant, who chooses to return the completed packet via USPS, send via USPS Priority mail or USPS Return Receipt for tracking purposes. Once the Office of Congressman Murphy is in receipt of the applicant's completed packet, the applicant will be notified by staff in a timely manner. Should the applicant choose not to utilize USPS Priority mail or USPS Return Receipt, it is the responsibility of the applicant to ensure the completed packet has been received by the Office of Congressman Murphy.

**Questions? The applicant may contact Lauren Wandzel by e-mail at [Lauren.Wandzel@mail.house.gov](mailto:Lauren.Wandzel@mail.house.gov) or by phone at 252-636-6612.**



**Application for Nomination to US Service Academies**  
**Congressman Greg Murphy, MD**  
*North Carolina Third District*

Office of Congressman Murphy, MD  
2402 Dr. M.L.K. Jr Blvd • New Bern, NC 28562 • Office: (252) 636-6612

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**I. Personal Information**

Name: \_\_\_\_\_  
(last) (first) (middle)

Preferred name (if different from first name): \_\_\_\_\_

Date of birth: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
(street) (apt.)

\_\_\_\_\_  
(city, state, zip+4) (county)

Temporary Address (if applicable): \_\_\_\_\_  
(street) (apt.)

\_\_\_\_\_  
(city, state, zip+4) (county)

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Are you a US Citizen? Y / N

Are you or your parents/guardians legal residents of the 3rd Congressional District of NC? Y / N

Father's name: \_\_\_\_\_

Father's Address: \_\_\_\_\_  
(street) (apt.)

\_\_\_\_\_  
(city, state, zip+4) (county)

Father's Employer: \_\_\_\_\_ Work Number: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Mother's Address: \_\_\_\_\_  
(street) (apt.)

\_\_\_\_\_  
(city, state, zip+4) (county)

Mother's Employer: \_\_\_\_\_ Work Number: \_\_\_\_\_

Do you have any brothers and/or sisters? Y / N If so, list their names and ages:

Name	Age
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

## II. Academy Preference:

Please rank the Academies in order of preference (1-4): **Must provide proof of application to each academy you are requesting a nomination for.**

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

*(If you do not mark an Academy, you will not be considered for that academy.)*

Have you applied for a Service Academy nomination to any other source, congressional or otherwise (for this year or a prior year)? Y / N If so, what was the result? \_\_\_\_\_

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

\_\_\_\_\_ Senator Tillis \_\_\_\_\_ Senator Burr \_\_\_\_\_ JROTC \_\_\_\_\_ President \_\_\_\_\_ Vice President

If you are now in the military service, give branch of service: \_\_\_\_\_

rank: \_\_\_\_\_ length of service: \_\_\_\_\_

## III. School Information:

High School: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

College (if any): \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Courses Taken: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### IV. Extracurricular Activities:

List any academic honor societies to which you belong and/or any academic awards you have received:

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List any significant leadership positions you have held since entering ninth grade: \_\_\_\_\_

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List any **non-athletic/non-academic** awards, achievements, prizes or accomplishments: \_\_\_\_\_

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List any organized sports in which you have participated since entering ninth grade, indicating varsity squad status for each, and letters or other awards received if any: \_\_\_\_\_

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**If no** organized sports participation, indicate **why not** and list physical activities in which you participate:

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List your primary interests and hobbies: \_\_\_\_\_

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## V. Essays:

Write a brief character sketch of yourself. Include your basic attributes and those qualities which you believe are your strengths:

[illegible]

Why do you want to attend a U.S. Service Academy? \_\_\_\_\_

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Why do you believe you are qualified to be nominated? \_\_\_\_\_

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## VI. Recommendation Forms:

- Have a teacher or coach who is not related to you complete the teacher/coach recommendation form with his/her signature across the sealed envelope flap.
- Have a person that knows you well, but is not related to you, complete the personal recommendation form with his/her signature across the sealed envelope flap.

## VII. Academic Records:

- Mail a **sealed official** transcript from all high schools, community colleges, or colleges you have attended prior to October 1, 2021. The high school transcript must include your class rank.
- Official SAT scores if they are not noted on your official academic transcript.

## VIII. Signature:

The following information on this form and any attachments or enclosures are true, complete, and correct to the best of my knowledge. I am a United States citizen or will be by the time I enter the Academy; at least 17 but not yet 23 years of age on July 1<sup>st</sup> of admission year to the Academy; unmarried, not pregnant, and am without legal obligation to support children or other dependents; and a permanent resident of the Third Congressional District of the state of North Carolina.

I understand that the *deadline for application is **October 1, 2021***. If I have not submitted *all requested information by this deadline*, I understand that my application will not be given consideration.

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(signature)

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(date)

Please do **NOT** staple forms together or print on the backs of any pages. Use extra pages as necessary. Completed nomination application packets must be postmarked or date-stamped no later than October 1, 2021. No exceptions.

Mail all required forms and information:

**Office of Congressman Murphy, MD  
2402 Dr. M.L.K. Jr Blvd,  
New Bern, NC 28562**

Please attach wallet size  
head and shoulder  
photograph of yourself  
here with tape or paper  
clip. No staples please.



## US Service Academy Nomination

Congressman Greg Murphy, MD  
North Carolina Third District

### Personal Recommendation

This recommendation is for a person applying for a nomination to a U.S. Service Academy. The purpose of the service 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 type your answers to the below questions on this form or in a typed letter. Prior to sealing, ensure your wet signature is documented along with the date. Once sealed, sign your name across the flap of the envelope and return to the applicant. *Thank you for taking the time to complete this recommendation.*

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 to be with regard to leadership potential?

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What do you consider the applicant's weaknesses to be? \_\_\_\_\_

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In your opinion, would the applicant be able to effectively take and follow orders from superior officers?

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

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Do you know of any circumstances or conditions that would affect the applicant's performance at a service academy? If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

How does the applicant handle stressful situations? \_\_\_\_\_

\_\_\_\_\_

Do you have any reservations about recommending the applicant for a nomination? If yes, please explain.

\_\_\_\_\_

\_\_\_\_\_

Please feel free to make any additional comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please print or type the following information:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

Your signature: \_\_\_\_\_

*Please do not staple forms together or print on the backs of any pages. Questions? The applicant may contact Lauren Wandzel by e-mail at [Lauren.Wandzel@mail.house.gov](mailto:Lauren.Wandzel@mail.house.gov) or by phone at 252-636-6612*





## US Service Academy Nomination

Congressman Greg Murphy, MD  
North Carolina Third District

### Teacher/Coach Recommendation

This recommendation is for a person applying for a nomination to a U.S. Service Academy. The purpose of the service 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 type your answers to the below questions on this form or in a typed letter. Prior to sealing, ensure your wet signature is documented along with the date. Once sealed, sign your name across the flap of the envelope and return to the applicant. *Thank you for taking the time to complete this recommendation.*

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 to be 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 take and follow orders from superior officers?

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

Do you know of any circumstances or conditions that would affect the applicant's performance at a service academy? If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

How does the applicant handle stressful situations? \_\_\_\_\_

\_\_\_\_\_

Do you have any reservations about recommending the applicant for a nomination? If yes, please explain.

\_\_\_\_\_

\_\_\_\_\_

Please feel free to make any additional comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please print or type the following information:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

Your signature: \_\_\_\_\_

*Please do not staple forms together or print on the backs of any pages. Questions? The applicant may contact Lauren Wandzel by e-mail at [Lauren.Wandzel@mail.house.gov](mailto:Lauren.Wandzel@mail.house.gov) or by phone at 252-636-6612.*