US Service Academy Nomination Applicant Checklist
Congressman Greg Murphy, MD
North Carolina Third District

1. ____ **Application Form:** complete application form and attach photograph.

2. ____ **Two Recommendation Forms:** send in completed and sealed with signature over sealed envelope flap.

3. ____ **Academic:**
   - ____ **Sealed official transcript:** (from all high schools, community colleges, or colleges you have attended prior to December 1, 2019.)
   - ____ **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 or date-stamped (if sent electronically) no later than December 1, 2019. No exceptions.

Mail all required forms and information:

Congressman Greg Murphy, MD
1105 Corporate Drive, Suite C
Greenville, NC 27858

Questions? The applicant may contact Lindy Robinson by e-mail at Lindy.Robinson@mail.house.gov or by phone at 252-931-1003.
I. Personal Information

Name: ___________________________________________ (last) (first) (middle)

Preferred name (if different from first name): __________________________________________

Date of birth: __________________________ Social Security Number: __________________________

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:

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<th>Name</th>
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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:

__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________

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

__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________

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

__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________

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:

__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________

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

__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________

List your primary interests and hobbies:

__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________
V. Essays:

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

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Why do you want to attend a U.S. Service Academy? _________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Why do you believe you are qualified to be nominated? ________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
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 December 1, 2019. 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 1st 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 December 1, 2019.** If I have not submitted **all requested information by this deadline,** I understand that my application will not be given consideration.

________________________________________  ______________________________
   (signature)                                   (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 December 1, 2019. No exceptions.

Mail all required forms and information:

Congressman Greg Murphy, MD  
1105 Corporate Drive, Suite C  
Greenville, NC27858

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 answer all questions on this form or in a letter of your own writing, place the completed form or letter in a sealed envelope, sign your name across the flap, 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: ___________________________

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 Lindy Robinson by e-mail at Lindy.Robinson@mail.house.gov or by phone at 252-931-1003.*
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 answer all questions on this form or in a letter of your own writing, place the completed form or letter in a sealed envelope, sign your name across the flap, 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 Lindy Robinson by e-mail at Lindy.Robinson@mail.house.gov or by phone at 252-931-1003.