NOMINATION APPLICATION TO UNITED STATES SERVICE ACADEMIES
For the Period
March 19, 2006 to October 13, 2006
(Entry June 2007)

United States Senator
Ken Salazar

PLEASE TYPE (preferred) OR PRINT

PLEASE USE THIS ORIGINAL APPLICATION ONLY

Academy Preferences
(Indicate your preferences with 1st, 2nd, 3rd, 4th choices)

West Point_____Naval_____Air Force_____Merchant Marine_____

Personal Information

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

Permanent Home Address _____
(Street Address)

_____
(City/Town) (County) (Zip)

Telephone Number _____ _____
(First) (Next)

Date of Birth (mm/dd/yr) _____ **Soc. Sec. No.**_____

Sex (M / F) _____ **Citizen?** (Y / N)_____

Current Mailing Address
(If different from above) _____
(Street Address)

_____
(City/Town) (County) (Zip)

Medical Information Have you had asthma or other respiratory ailments? (Y / N)_____
If yes, age at last occurrence._____
Do you require corrective lenses? (Y / N)_____

Name(s) of Parent(s) or Legal Guardian(s)

_____
(Last) (First) (Relationship)

_____
(Last) (First) (Relationship)

Academic Information

High School

_____
(Name)

_____
(Street Address)

_____
(City / Town) (State) (Zip)

_____ _____
(Telephone Number) (Counselor)

Graduation Year_____ Grade Point Average_____

Class Standing_____ No. of Students in Class_____

ACT Scores: Math_____Eng_____Reading_____Science Reasoning_____Date last taken_____

SAT Scores: Math_____Verbal_____Writing_____Date last taken_____

College

_____
(Name)

_____
(Address)

_____
(City / Town) (State) (Zip)

Dates of Attendance: From_____ To_____
(mm/yr) (mm/yr)

School and Community Activities

Briefly describe your involvement in school and community activities in the listed categories. Include information relative to offices held, awards and honors received. Show also years of involvement in each activity. **Only one page in addition to this form concerning activities, awards, etc. will be considered in the evaluation process.**

INTERSCHOLASTIC SPORTS:

SCHOOL AND CLASS OFFICES HELD:

BAND, DRAMATICS, CHORALE:

SCHOLASTIC ACTIVITIES, AWARDS and HONORS:

OTHER ACTIVITIES YOU CONSIDER IMPORTANT, Including job, volunteer/community activities, etc.

References

Give names and addresses of three adults whom you will request to complete the enclosed Evaluation Forms. (At least one of these must be from a counselor, teacher or principal).

1. _____
(Last) (First)

_____
(Street Address) (City / Town) (State) (Zip)

2. _____
(Last) (First)

_____
(Street Address) (City / Town) (State) (Zip)

3. _____
(Last) (First)

_____
(Street Address) (City / Town) (State) (Zip)

RETURN THIS APPLICATION TO:

Senator Ken Salazar
2300 15th Street
Suite 450
Denver, CO 80202
ATTN: Nominations Coordinator
303-455-7600

Remember: The deadline is Oct. 13, 2006 to have your completed package in the office! Late applications will not be considered.