

# Application Request Form

Ohio 15<sup>th</sup> Congressional District Residents Only

*\*This form must be submitted by FRIDAY, SEPTEMBER 22, 2017.*

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Date: \_\_\_\_\_

Dear Congressman Stivers:

I am interested in pursuing a nomination to the following U.S. Service Academies and request an application be e-mailed to me so that I may apply for a nomination for the class that enters the Academy in the summer of 2018.

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

County \_\_\_\_\_ Home Phone Number \_\_\_\_\_

Email Address (Please list an email address that will be used for future communications and one that is checked regularly. The applications will be also sent to this email address.)

\_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number (Last 4 digits only) \_\_\_\_\_

Name of Father \_\_\_\_\_

Name of Mother \_\_\_\_\_

High School \_\_\_\_\_ Graduation Date \_\_\_\_\_

I have requested or intend to request that an admissions file be initiated for me at the following Service Academy Admissions Office(s):

	<u>Have</u>	<u>Intend to</u>	<u>Not Interested</u>
U.S. Air Force Academy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
U.S. Naval Academy at Annapolis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
U.S. Merchant Marine Academy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
U.S. Military Academy at West Point	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I acknowledge that I am a resident of Ohio's 15<sup>th</sup> Congressional District.

Sincerely,

\_\_\_\_\_  
(Please sign above)

**NOTE: After you have completed this form, please mail it to Congressman Steve Stivers, 104 E. Main Street, Lancaster, Ohio 43130 or fax it to (740) 654-2482. Application packets will be sent via e-mail to the email address listed on this form beginning in May.**