SERVICE ACADEMY NOMINATION APPLICATION



Congressman Mike Johnson Louisiana, 4th District

Thank you for your interest in attending a service academy. To receive an appointment to an academy, you must apply directly to the academy of your choice and receive a nomination from one of several nominating sources. This packet contains the nomination application for Congressman Mike Johnson, Louisiana, 4th District and a checklist of all materials that will be required to constitute a complete packet.

Applicants must contact the academy(ies) they wish to attend and open an admission file. After opening a file, the academy will send a Candidate Kit with specific instructions on their application process. The congressional nomination packet is SEPARATE FROM the materials you must provide to the academies. You must meet the application requirements of the academy to be nominated by Congressman Johnson. It is to your advantage to apply to MORE THAN ONE academy.

Please note: Acceptance at a service academy involves at least a nine-year obligation: four years at the academy and five years of service.

Your completed nomination packet, including the application and all requested materials, must be postmarked or received no later than Wednesday, November 6, 2024. <u>Do not send this application to our Washington</u>, DC office. You may scan and email the entire application to Kathy.Babers@mail.house.gov.

Congressman Mike Johnson 2250 Hospital Drive, Suite 248 Bossier City, Louisiana 71111 Congressman Mike Johnson 3329 University Parkway, Bldg 552 Leesville, Louisiana 7144

Full Legal Name: Preferred name: Permanent Address: Temporary Address: _____ Date of Birth: Gender: M F O Applicant Cell Phone Number: _____ Email Address: _____ CRIMINAL HISTORY Have you ever been convicted of a felony or misdemeanor? O YES O NO If yes, explain: *Only exclusions should be speeding tickets, parking tickets, or traffic violations. PARENT CONTACT INFORMATION Father Name: _____Cell Number: _____ Mother Name: _____Cell Number: _____ **EMPLOYMENT HISTORY** Have you held a paying job? Yes No If yes: Place and Duties: _____ Dates: Place and Duties:

PERSONAL DATA

EDUCATIONAL HISTORY

Dual Enrollment Courses

Name of High School:				
Address:				
Phone:		Guidance Couns	elor Name:	
Date of Graduation:				
Estimated Class Rank and	Size:	/		*Please note if rank is not used.
Name of College Attended	l (if applicable):		
Course of Study:				
Name of Military Branch (fapplicable):			
STANDARDIZED TEST SCOR	RES			
*Must be provided on offi tests take.	cial letterheac	d. We use the highe	st score in each	subcategory so please provide all
SAT Composite:	Math	Reading	Writing	
ACT Composite:	Math	Science	Reading	English
Provide advanced courses	below:			
AP Courses				
CLEP Tests				
GLE PESTS				

PHYSICAL FITNESS

Have you taken or been scheduled to take your Academy Medical Exam? (scheduled by DODMERB) Yes No					
Physical Aptitude Exam? Yes	No				
	articipate in now or have in the past as individual and team sports as well				
Example: Football	3 years	4-A All-Dist. 2 years, Captain 1 yr			
Sport	Number of Years	Awards			

LEADERSHIP

List all extra-curricular activities in which you are involved. Please include school and community or church-based activities. Identify any leadership roles in which you currently serve or have served.

Activity/Club	Years	Leadership Role

ESSAY

In the space below, or on a separate sheet of paper, write an essay explaining why you would like to attend a service academy. Word count should be 500 or less.

SELECTIONS

I wish to be nominated to the following academy(ies your preference(s) FOR ONLY the academy(ies) you than one. If you will not accept a nomination to an	wish to attend. It is to your advantage to apply to more
U.S. Military Academy	U.S. Air Force Academy
U.S. Naval Academy	U.S. Merchant Marine Academy
REFERENCES	
Provide the name and title of people providing you letters are provided with the packet; however, they to the attention of Jerrie LeDoux. One letter must be Counselor. The Principal or Guidance Counselor letter Name	may be mailed to the Bossier City or Leesville office e from your High School Principal or Guidance
	Title/Organization
2	
3	
4	
5	

If you wish to give us permission to release information regarding your nomination or appointment, please provide the names of your local newspapers:

CHECKLIST FOR SERVICE ACADEMY NOMINATION PACKET

Your application is not complete without all required information. Your application and all requested materials must be delivered by mail or hand to either the Bossier City or Leesville office no later than November 8, 2023. Do not send your application to the Washington, DC office.

Please initial to indicate item is included in your packet.
Nomination application. Your application may be completed on paper or you can complete the fillable pdf on the website and print and mail.
Packet included a 500-word essay on your motivation for attending a service academy.
Official copy of ACT and/or SAT scores. May be sent by student, but must be on official letterhead.
1-page resume. Please include anything you wish to highlight not found in the application.
Recent headshot photo
Letters of recommendation. At least 3, but no more than 5. See instructions on previous page.
An official transcript of your high school record including junior year. College transcripts are required if you have completed a semester.
Your numerical rank shown on transcript or provided separately.
You have established an open application to each academy you RANKED ON PAGE 7 . Your application is NOT complete until you have applied to the academy directly.
I understand to receive consideration for a nomination, this application packet and required materials must be submitted no later than November 8, 2023. I understand that acceptance at a service academy involves a nine-year commitment. I certify I personally completed the application packet, and it is true and accurate to the best of my knowledge. I meet all eligibility requirements set forth by the respective academy I wish to attend.
By signing and dating this form, I am confirming I understand and agree to the above statements.
Signature:
Date: