

Congressman John K. Delaney

U.S. Service Academy Nomination Guidance Counselor Form

The applicant's high school guidance counselor must complete this form. It must be included in the student's application packet, which must be postmarked by the due date.

NAME OF
APPLICANT:

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

NAME OF SCHOOL:

SCHOOL ADDRESS:

CITY:

STATE:

ZIP CODE:

SCHOOL PHONE:

APPLICANT'S YEAR
IN SCHOOL:

GPA (Please use a
4.0 scale and
indicate whether the
GPA is weighed):

YEAR OF
GRADUATION:

CLASS RANK

TESTING SCORESSAT SCORE
(COMBINED):

DATE OF TEST:

SAT (MATH):

SAT (CRITICAL
READING):SAT (WRITING-
OPTIONAL):

ACT SCORE:

DATE OF TEST:

ADDRESS:

OTHER QUESTIONS

Has this student ever been suspended or expelled from school? If so, please attach a letter explaining the circumstances.

YES
NO

PLEASE READ BEFORE SIGNING:

The information provided above is complete and accurate to the best of my knowledge.

SIGNATURE:

PRINTED NAME:

TITLE:

DATE:

This form must be included in the packet submitted by the student. Please do not submit separately.