



# U.S. Congressman Randy Weber

14th Congressional District, Texas



**2021 APPLICATION FOR U. S. SERVICE ACADEMY NOMINATION**  
APPLICATION DEADLINE: 15 OCTOBER 2021 (To be completed carefully and completely by the applicant ONLY)

NAME (Last, First, Middle)				PREFERRED NAME	
----------------------------	--	--	--	----------------	--

MAILING ADDRESS (Street)	CITY	STATE	ZIP CODE	COUNTY
--------------------------	------	-------	----------	--------

E-MAIL ADDRESS	HOME PHONE #	CELL PHONE #
----------------	--------------	--------------

DATE OF BIRTH	CITY OF BIRTH	STATE	COUNTRY	<input type="checkbox"/> YES <input type="checkbox"/> NO ARE YOU A U.S. CITIZEN?
---------------	---------------	-------	---------	---

AGE	<input type="checkbox"/> YES <input type="checkbox"/> NO HAVE YOU PREVIOUSLY PARTICIPATED IN A CONGRESSIONAL NOMINATIONS PROCESS?	<input type="checkbox"/> YES <input type="checkbox"/> NO HAVE YOU PREVIOUSLY RECEIVED A CONGRESSIONAL NOMINATION?	<input type="checkbox"/> YES <input type="checkbox"/> NO IS YOUR PRIMARY RESIDENCE IN THE 14TH DISTRICT?
-----	--	--	---

FATHER or GUARDIAN'S NAME	TELEPHONE #
---------------------------	-------------

ADDRESS (Street)	CITY	STATE	E-MAIL ADDRESS
------------------	------	-------	----------------

MOTHER or GUARDIAN'S NAME	TELEPHONE #
---------------------------	-------------

ADDRESS (Street)	CITY	STATE	E-MAIL ADDRESS
------------------	------	-------	----------------

## EDUCATION

NAME OF HIGH SCHOOL	EXPECTED GRADUATION DATE
---------------------	--------------------------

ADDRESS (Street)	CITY	STATE	TELEPHONE #
------------------	------	-------	-------------

COUNSELOR NAME	E-MAIL ADDRESS	TELEPHONE #
----------------	----------------	-------------

HIGH SCHOOL GPA: PLEASE USE 4.0 SCALE	CLASS RANK:		<input type="checkbox"/> VALEDICTORIAN <input type="checkbox"/> OTHER <input type="checkbox"/> SALUTATORIAN
	OF	PERCENTILE:	

## EDUCATION (Continued)

AP CLASSES    
  HONORS CLASSES    
  IB PROGRAM    
  DUAL CREDIT CLASSES    
  OTHER

HAVE YOU TAKEN, OR ARE CURRENTLY ENROLLED IN ANY OF THE ABOVE (CHECK ALL THAT APPLY)

HIGH SCHOOL SENIOR    
  COLLEGE (ANY CLASSIFICATION) ATTENDING ON A CIVIL PREP SCHOLARSHIP

COLLEGE (ANY CLASSIFICATION)    
  ATTENDING AN ACADEMY PREP SCHOOL    
  OTHER

PLEASE INDICATE YOUR ACADEMIC STATUS AS OF OCTOBER 15, 2021

IF YOU ARE A HIGH SCHOOL GRADUATE, WHERE ARE YOU CURRENTLY ATTENDING?	ADDRESS (Street, City, ST, Zip)	TELEPHONE #
---	---------------------------------	-------------

COLLEGE HOURS COMPLETED:		COLLEGE GPA:		OFFICIAL COLLEGE TRANSCRIPT <b>MUST BE</b> INCLUDED WITH COMPLETED APPLICATION (IF COLLEGE COURSES HAVE BEEN TAKEN)
--------------------------	--	--------------	--	---

<input type="checkbox"/> YES <input type="checkbox"/> NO			
MEMBER OF THE ARMED FORCES? <sup>1</sup>	MOS/AFSC/RATE	LOCATION/UNIT OF ASSIGNMENT	COMMANDING OFFICER

### ACADEMY PREFERENCE(S)

**RANK YOUR 1ST, 2ND, 3RD, AND 4TH PREFERENCE(S), IF APPLICABLE**  
 ONLY indicate preferences for academy(s) where you would actually accept an appointment

US MILITARY ACADEMY WEST POINT, NY	US NAVAL ACADEMY ANNAPOLIS, MD	US AIR FORCE ACADEMY COLORADO SPRINGS, CO	US MERCHANT MARINE ACADEMY KINGS POINT, NY
---------------------------------------	-----------------------------------	--	--

<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> USMA <input type="checkbox"/> USAFA <input type="checkbox"/> USNA <input type="checkbox"/> USMMA
HAVE YOU RECEIVED A LETTER OF ASSURANCE?	IF YES, TO WHICH ACADEMY(S)? (Check all the apply)

<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> USMA <input type="checkbox"/> USAFA <input type="checkbox"/> USNA <input type="checkbox"/> USMMA
HAVE YOU VISITED AN ACADEMY OR PARTICIPATED IN ANY SUMMER SEMINAR OR SPONSORED STEM EVENT?	IF YES, TO WHICH ACADEMY(S)? (Check all the apply)

TO WHICH ACADEMIES HAVE YOU APPLIED, AND WHEN? (Please indicate the approximate date next to the Academy you applied)

US MILITARY ACADEMY WEST POINT, NY	US NAVAL ACADEMY ANNAPOLIS, MD	US AIR FORCE ACADEMY COLORADO SPRINGS, CO	US MERCHANT MARINE ACADEMY KINGS POINT, NY
---------------------------------------	-----------------------------------	--	--

PLEASE NOTATE WHAT OTHER COLLEGES AND/OR UNIVERSITIES YOU HAVE APPLIED TO AND/OR BEEN ACCEPTED:

YOU ARE HIGHLY ENCOURAGED TO APPLY TO OTHER AVAILABLE NOMINATING SOURCES  
 CHECK ALL OTHER SOURCES TO WHICH YOU ARE APPLYING

SENATOR CORNYN   
  SENATOR CRUZ   
  VICE PRESIDENT HARRIS   
  PRESIDENT BIDEN<sup>2</sup>

### COLLEGE ENTRANCE EXAMINATIONS . INDICATE SCORE(S) AND DATE(S) TAKEN

SAT READING	MATH	WRITING	COMPOSITE	DATE	SAT READING	MATH	WRITING	COMPOSITE	DATE				
ACT ENG	MATH	READING	SCIENCE	WRITING	COMP	DATE	ACT ENG	MATH	READING	SCIENCE	WRITING	COMP	DATE

Have you ever been arrested, charged, or indicted in conjunction with a misdemeanor or felony? If yes: why, and what was the outcome?

<sup>1</sup> Armed Forces include: ROTC, National Guard, Reserves, and Active Duty

<sup>2</sup> A Presidential Nomination only applies to applicants who have a parent currently on, or retired from active military duty

**EXTRACURRICULAR ACTIVITIES (school affiliated/ non sport):**

*List Organization/Activity, Positions/Office Held and any Special Recognitions*

**FRESHMAN:**

---

---

---

---

**SOPHOMORE:**

---

---

---

---

**JUNIOR:**

---

---

---

---

**SENIOR:**

---

---

---

---

**ATHELETIC ACTIVITIES (sports: school or club/marching band):**

*List all sports you have participated in either as an individual or part of a team and/or list participation in marching band.  
Include Sport/Activity, School or Club, Position/Specialty/Instrument and Awards/Recognition/Letter*

**FRESHMAN:**

---

---

---

---

**SOPHOMORE:**

---

---

---

---

**JUNIOR:**

---

---

---

---

**SENIOR:**

---

---

---

---

**EXTRACURRICULAR ACTIVITIES ( *non school affiliated* ):**

*List Organization/Activity, Positions/Office Held and Special Recognitions. Include civic, church, hobbies and special interest groups*

**FRESHMAN:**

---

---

---

---

---

---

---

---

**SOPHOMORE:**

---

---

---

---

---

---

---

---

**JUNIOR:**

---

---

---

---

---

---

---

---

**SENIOR:**

---

---

---

---

---

---

---

---

**EMPLOYMENT ACTIVITY:**

*Please list any part or full-time jobs you have held since you have been in high school. Note: list dates worked for each employer*

<i>EMPLOYER</i>	<i>POSITION</i>	<i>HOURS WORKED PER WEEK</i>	<i>DATES WORKED (TO-FROM)</i>
<i>EMPLOYER ADDRESS (Street)</i>	<i>CITY</i>	<i>STATE</i>	<i>TELEPHONE #</i>
<i>EMPLOYER</i>	<i>POSITION</i>	<i>HOURS WORKED PER WEEK</i>	<i>DATES WORKED (TO-FROM)</i>
<i>EMPLOYER ADDRESS (Street)</i>	<i>CITY</i>	<i>STATE</i>	<i>TELEPHONE #</i>
<i>EMPLOYER</i>	<i>POSITION</i>	<i>HOURS WORKED PER WEEK</i>	<i>DATES WORKED (TO-FROM)</i>
<i>EMPLOYER ADDRESS (Street)</i>	<i>CITY</i>	<i>STATE</i>	<i>TELEPHONE #</i>

**AWARDS/HONORS/SCHOLARSHIPS:**

*List 5 that most exemplify your commitment to excellence*

<i>NAME OF AWARD</i>	<i>YEAR RECEIVED</i>	<i>PRESENTING ORGANIZATION</i>	<i>AWARD CRITERIA</i>
<i>NAME OF AWARD</i>	<i>YEAR RECEIVED</i>	<i>PRESENTING ORGANIZATION</i>	<i>AWARD CRITERIA</i>
<i>NAME OF AWARD</i>	<i>YEAR RECEIVED</i>	<i>PRESENTING ORGANIZATION</i>	<i>AWARD CRITERIA</i>
<i>NAME OF AWARD</i>	<i>YEAR RECEIVED</i>	<i>PRESENTING ORGANIZATION</i>	<i>AWARD CRITERIA</i>
<i>NAME OF AWARD</i>	<i>YEAR RECEIVED</i>	<i>PRESENTING ORGANIZATION</i>	<i>AWARD CRITERIA</i>

**REFERENCES:**

*A completed Personal Evaluation Form **MUST** accompany each Letter of Recommendation. Do not send more than three . One must be from a high school teacher, principal, or guidance counselor. The other reference(s) is/are at the applicant's discretion; however, if applicant is attending a prep school or on active military duty, one of these letters **MUST** be from a commanding officer. NO letters from family members will be accepted.*

*Those individuals completing a Personal Evaluation Form and providing a Letter of Recommendation should place them together into one envelope, seal and write their signature across the envelope flap. Request them to return the sealed envelope to you for inclusion in your application packet.*

**REFERENCE #1**

**REFERENCE #2**

*This space left intentionally blank.*

## ACKNOWLEDGEMENTS

*Please read carefully before signing*

The information above is true and correct to the best of my knowledge. It is my sincere desire to attend a U.S. Service Academy, and I fully intend to accept an appointment, if offered. I am a U.S. citizen, or will be by July 1, 2022. I am or will be at least 17, but not yet 23 years of age, on July 1, 2022. I am unmarried, not pregnant and have no child support obligation. I am a legal resident of the 14th Congressional District of Texas.

I request that Congressman Weber consider my application for a nomination to the U.S. service academy or academies I have indicated. I request Congressman Weber to monitor my progress in seeking an appointment to an Academy, and hereby consent for the Academy to divulge information from my records for this purpose.

Provisions of the Privacy Act of 1974 are waived to the extent of sharing this information with the Service Academies and their representatives as well as members of Congressman Weber's Service Academy Advisory Board.

I understand that my application file must be completed by the *October 15, 2021 deadline* . If I have not completed and postmarked or delivered to your League City office *ALL* the required information and documentation by that date, I understand that my application will not be given *ANY* consideration.

I understand that all information in my candidate file for Congressman Weber's office including but not limited to recommendation letters, evaluations forms and notes is privileged and not accessible to the candidate.

In the event that I do receive a nomination, I authorize Congressman Weber's office to release this information to the news media and the public.

In the event that I do receive an appointment and I accept said offer of appointment, I authorize Congressman Weber's office to release this information to the news media and the public.

APPLICANT SIGNATURE

DATE

PARENT OR GUARDIAN SIGNATURE

DATE

PARENT OR GUARDIAN SIGNATURE

DATE

*If a **third party** (such as a school counselor/representative, academy liaison, or other source) helped you complete this application, please provide their information below:*

NAME

TELEPHONE #

E-MAIL ADDRESS

SIGNATURE

DATE