

Privacy Act Statement. In accordance with 5 USC 552a(e)(3), the following information is provided to you when supplying personal information to the USCG. (1) Authority which authorizes the solicitation of the information: 14 USC 182(a). (2) The Principal Purpose for this information is to ensure that the applicant is basically qualified to apply for the USCGA. (3) Routine uses which may be made of the info: As background info on applicants for the selection process. To contact the applicant. The SSN is a basic identifier. To determine if there are existing USCG records on the individual. In performance of the duties of officials and employees of the USCG, in managing and contributing to the admissions program and appointment of Cadets. (4) Disclosure of the information is voluntary, but the applicant will not be considered further if the information is not provided. Submissions of the Evaluator will not be disclosed to the applicant without consent.

Please provide the information requested in Section 1. On the front of a blank envelope, print the following four lines of information: (1) Your Name; (2) The last four digits of your SSN; (3) English Instructor Evaluation; and (4) U.S. Coast Guard Academy. Provide this form and the envelope to your English instructor and request that the form be returned to you in the sealed envelope. This form must be returned to the Admissions Office, along with your other supplemental forms, by March 1st.

Section 1:

Signature: ___

Name:	Last Four Digits of SSN:		
City:	State: Zip Code:		
Telephone:	Email:		

<u>Section 2</u>: The above student is applying to the U.S. Coast Guard Academy. Please complete this form and seal it in the envelope provided by the applicant. Sign your name over the envelope seal to ensure confidentiality and return it to the student. On the back of this form or in a separate letter of recommendation, please discuss how well this student will: 1) Perform in a rigorous curriculum infused with writing requirements; and 2) Demonstrate respect and compassion toward others. Thank you for your time and assistance.

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U.S. Dept. of Homeland Security, USCG, CGA-14 (Rev. 02-08)

OMB No. 1625-0004

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The Coast Guard estimates that the average burden for this form is 15 minutes. You may submit any comments concerning the accuracy of this estimate or any suggestions for reducing the burden to: U.S. Coast Guard Academy, 31 Mohegan Avenue, New London, CT 06320, or Department of Homeland Security Desk Officer, Office of Management and Budget, Office of Information and Regulatory Affairs, Washington, D.C. 20503.

Date: Telephone: