## **Supplemental Information Sheet**

Form Approved OMB No. 0702-0061 Expires: 2/28/2006

| FIRST NAME  | M.I.   |
|---|--|
|   |  |
| LAST NAME   | <b> </b>   |
|   | STATE  |
|   |  |
| The public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing maintaining the data needed, and completing and reviewing the collected information. Send comments regarding this burden estimate or any other aspect of this collection of   | of information, including suggestions  |
| for reducing this burden to Department of Defense, Washington Headquarters Services, Directorate of Information Operations and Reports (0702-0061), 1215 Jefferson Davided Services, Developed to any penalty for failing to comply with a collection of law, no person shall be subject to any penalty for failing to comply with a collection of currently valid OMB control number, Please DO NOT RETURN this form to the above address. Send your competed form to Admissions, USMA, Official Mail and District | of information if it does not display a  |
| Point, NY 10996-1905. Privacy Act Statement: AUTHORITY: Title 5 USC, Ch 301: Title 10 USC, Ch 403 Sec 4346, Ch 503, Ch 505 Sec 5031, Ch 603 Sec 6958: Title 44 USC 3101: EQ 9397. PR  | INGIPAL PURPOSE; Collection of data  |
| on Academy candidate for admissions qualifications. ROUTINE USE: To allow a candidate to add supplemental Information in their candidate file at West Point. DISCLOSI to provide information could preclude appointment.  | URE IS VOLUNTARY. However, failure   |
|   |  |
| INSTRUCTIONS FOR CANDIDATES:  |  |
| Please use the space below to provide: (a) a listing of your high school or college athletic extracurricular activities, and (b) a listing of other awards or activities that are not reflected on the  | participation and  |
| Please forward these remarks with the Activities Record, but do not staple them together.   | S YIOGIVIRGO EXCORA.   |
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