



West Point Admissions Request

Form Approved
OMB No. 0702-0060
Expires: 2/28/2006

The public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0702-0060), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. Please DO NOT RETURN this form to the above address. Send your completed form to Admissions, USMA, Official Mail and Distribution Center, 646 Swift Road, West 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 695A; Title 44 USC 3101. EO9397. PRINCIPLE PURPOSE: Collection of data on Academy candidate for opening a file. ROUTINE USE: To gather information on a candidate in order to open a file for admission to West Point. DISCLOSURE IS VOLUNTARY. However, failure to provide information could preclude appointment.

Please send information to:

NAME _____
Last First MI

ADDRESS _____
Street City State

ZIP CODE -

YEAR OF HIGH SCHOOL GRADUATION _____

**NOTE: If you wish to respond immediately visit our Internet site:
<http://forms.admissions.usma.edu/ai>**

DEPARTMENT OF THE ARMY
United States Military Academy
646 Swift Road
West Point, New York 10996-1905



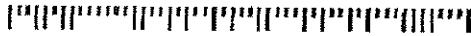
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FIRST CLASS MAIL PERMIT NO 51 WEST POINT, NY

POSTAGE WILL BE PAID BY THE ADDRESSEE

DIRECTOR OF ADMISSIONS
UNITED STATES MILITARY ACADEMY
OFFICIAL MAIL & DISTRIBUTION CENTER
646 SWIFT ROAD
WEST POINT NY 10996-9902

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UNITED STATES

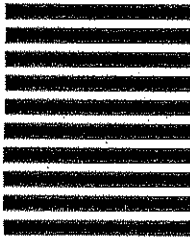




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DEPARTMENT OF THE ARMY
 United States Military Academy
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 West Point, New York 10996-1905

DO NOT TEAR

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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; EO9397. PRINCIPLE PURPOSE: Collection of data on Academy candidate for opening a file. ROUTINE USE: To gather information on a candidate in order to open a file for admission to West Point. DISCLOSURE IS VOLUNTARY. However, failure to provide information could preclude appointment.

I would like to receive another Prospectus with a Precandidate Questionnaire.
 My Social Security Number is _____

FOLD, TAPE, MAIL WITH THIS SIDE OUT

DEPARTMENT OF THE ARMY
UNITED STATES MILITARY ACADEMY
606 THAYER ROAD
WEST POINT NY 10996-1797

Director of Admissions
United States Military Academy
606 Thayer Road
West Point, NY 10996-1797

(Date)

Admissions' records indicate we have mailed a Prospectus containing a Precandidate Questionnaire to you. We have now received a request for another Prospectus to be sent. This request could have been initiated by you, by someone on your behalf, or in response to the receipt of your ACT or SAT scores. Since you have already received one Prospectus, we are not mailing another unless we hear from you. To receive another Prospectus, fill out the reverse side of this card, fold, tape and mail. Please verify your name and address on the mailing label. Correct if necessary.

Admissions Office

Admissions Participant Personnel Information

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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 data sources, gathering and maintaining the data needed, and completing and reviewing the collection information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to Department of Defense, Washington Headquarters Services, Directorate of Information Operations and Reports (0702-3060), 1215 Jefferson Davis Highway, suite 1204, Arlington VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. Please DO NOT RETURN this form to the above address. Send your completed form to Admissions, USMA, Official Mail & Distribution Center, 646 Swift Road, West 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; EO 9397. PRINCIPAL PURPOSE: Collection of data on prospective admissions participants. ROUTINE USE: To gather information on a prospective admissions participant to be used by the Admissions Office to determine suitability for the admissions field force. DISCLOSURE IS VOLUNTARY. However, failure to provide information could preclude appointment.

INSTRUCTIONS

Please complete this form and return it in the attached self-addressed envelope. Indicate any inapplicable paragraphs. Include in the remarks section any additional information not covered elsewhere. See below for definitions of the abbreviations used in this form.

1. NAME (Last, first, middle initial)		2. MILITARY BRANCH AND GRADE		3. DOR	
4. HOME ADDRESS (No. Street/Road, City, State, ZIP Code)				5. TELEPHONE (Include Area Code)	
6. BUSINESS ADDRESS (No. Street/Road, City, State, ZIP Code)				7. TELEPHONE (Include Area Code)	
8. OCCUPATION				9. SSN	
10. PREFERRED PLACE OF CONTACT <input type="checkbox"/> HOME <input type="checkbox"/> BUSINESS <input type="checkbox"/> EITHER			11. PREFERRED PLACE FOR MATERIALS TO BE SENT <input type="checkbox"/> HOME <input type="checkbox"/> BUSINESS <input type="checkbox"/> EITHER		
12. A. EDUCATIONAL BACKGROUND					
COLLEGES/UNIVERSITIES ATTENDED		LOCATION		YEAR GRADUATED	DEGREE
B. HIGHEST LEVEL OF MILITARY SCHOOL COMPLETED: SCHOOLING OR COURSE NAME					
13. DO YOU HAVE PERSONAL OR PROFESSIONAL CONTACT WITH YOUR REPRESENTATIVE IN CONGRESS? IF SO, INDICATE NATURE OF THE RELATIONSHIP. <input type="checkbox"/> YES <input type="checkbox"/> NO				14. CONGRESSIONAL DISTRICT IN WHICH YOU RESIDE	
15. IF YOU DESIRE TO BE AN ADMISSIONS PARTICIPANT IN A ZIP CODE AREA OTHER THAN THAT LISTED FOR YOUR RESIDENTS, PLEASE INDICATE HERE					
16. LIST THREE (3) REFERENCES ((include full names and addresses))					
17. RYE	18. ETS	19. DOB	20. SEX	21. RACE	22. SSI/PMOS
23. PEBD					
24. REMARKS					
25. SIGNATURE				26. DATE	
DEFINITIONS OF ABBREVIATIONS:					
DOR - Date of rank		RYE - Retirement year ending		PMOS - Permanent military occupation specialty	
SSI - Special skill identifier		DOB - Date of Birth		ETS - Estimated time of separation from the Army	
PEBD - Pay entrance basic date - when did you enter active duty the first time?					



United States Military Academy

Candidate Questionnaire

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FOLLOW THESE STEPS IN FILLING OUT THIS QUESTIONNAIRE:

- 1) Use a black ball point pen only. Do not use felt tip pen or pencil. Do not slash your 0's, 7's, or Z's.
- 2) Completely fill in all bubbles: ● Yes ○ No
- 3) If you make an error, completely cross out entry and re-write.
- 4) Do not send in a photo copy of this form. Only the original will be read.
- 5) For optimum accuracy, write block style without touching sides:

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

- 6) For faster service, complete this form online at <http://forms.admissions.usma.edu/cq>

The scanned form requires you to follow the directions above, and to enter codes in designated field. To avoid confusion, you may want to separate the instructions from the scanned form.

Race and Ethnicity: Please use the codes found on the reverse of this instruction sheet.

Congressional District: You can obtain your congressional district information from your local library, government offices or by visiting www.usma.edu/admissions/step2.asp If you cannot get this information, or are unsure of it, leave this entry blank.

Class Rank: If you don't know your class rank, or your school does not rank students, please provide an estimate. Absence of rank will result in an incomplete file and halt file processing.

ETS Code: To get your school ETS code ask your guidance counselor or visit http://cbweb10p.collegeboard.org/SAT_HSSearch/

Test Scores:

West Point encourages candidates to take the SAT and/or ACT more than once as we will accept your highest sub-scores. Be aware that West Point accepts only scores from the standardized, i.e. timed, version of the test. Scores from untimed test will not be considered. If you have not yet taken the ACT or SAT, leave those blank. However, you should provide at least one set of scores (most candidates will provide PSAT scores).

It is your responsibility to ensure that your scores are forwarded to us. The testing agencies will not release your test scores unless you authorize them to do so. Normally, this is done at the time you registered for the test. If you have already taken the SAT or ACT and did not indicate at the time you registered for the test that you wanted your scores forwarded to the U.S. Military Academy, you should write to the testing agency and request that they be so forwarded. A photo copy of your scores, or scores which appear on your high school transcript, can also be used.

In planning for future tests, use the following code numbers to report results to us: ACT- 2976; SAT- 2924. Note that some Members of Congress use the ACT or SAT test results in their nomination selection process; test scores should be sent to them as well. For the ACT, you must contact the specific Members of Congress (or visit <http://www.act.org/aap/scores/scodes.html>) to obtain their individual reporting codes. For the SAT, you must contact the specific Members of Congress (or the College Board Admissions Testing Program) to obtain their individual reporting codes.

Activities:

If you participated in any non-athletic or extracurricular activities in grades 9-12 that are not listed and for which you feel you deserve credit, please list them in the "Remarks" section. To complete the Athletic Activities section, use the codes on the reverse of this instruction sheet. If you lettered in sports for which no codes are available, please list them also in the "Remarks" section. Include position and height/weight only if applicable.

Race group:	Definition:	Code:
American Indian	having origins in any of the original peoples of North America	R
Asian	having origins in any of the original people of Asia, including China, Japan, and Korea	M
Black	having origins in any of the Black racial groups of Africa or other areas	B
Hispanic	having origins in any of the original peoples of Spain, Central or South America	S
White	having origins in any of the original peoples of Europe, North Africa or the Middle East	C
Other	of a race not included above	X
Unknown	do not know background	Z

Ethnic group:	Definition:	Code:	Ethnic group:	Definition:	Code:
Mexican	of Mexican descent	6	Chinese	of Chinese descent	G
Puerto Rican	of Puerto Rican descent	4	Japanese	of Japanese descent	J
Cuban	of Cuban descent	9	Korean	of Korean descent	K
Latin American	of Central and South American descent	S	Indian	from India or of Indian descent	D
Other Hispanic	of Spanish extraction not delineated as 6,4,9, or S	1	Filipino	of Filipino descent	5
Aleut	of Aleutian descent	8	Vietnamese	of Vietnamese descent	V
Eskimo	not including Aleuts	7	Other Asian	of Asian descent not delineated as G, J, K, D, 5, V, or 3	3
U.S./Canadian Indian	belonging to U.S. or Canadian Indian tribes (other than Aleut or Eskimo)	2	Melanesian	of Melanesian descent	E
Other	a member of an ethnic group not included here	X	Polynesian	of Polynesian descent	L
			Other Pacific Island	of Pacific Island descent not delineated as E or L	Q
			Unknown	do not know ethnic background	Z

Athletic

Activities:	Code:
Baseball	MBA
Basketball (Men)	MBB
Basketball (Women)	WBB
Boxing	MBX
Cross Country (Men)	MCC
Cross Country (Women)	WCC
Field Hockey	WFH
Football	MFB
Golf (Men)	MGO
Golf (Women)	WGO
Gymnastics (Men)	MGY
Gymnastics (Women)	WGY
Ice Hockey (Men)	MIH
Lacrosse (Men)	MLA
Lacrosse (Women)	WLA

Athletic

Activities:	Code:
Soccer (Men)	MSO
Soccer (Women)	WSO
Softball	WSB
Swimming (Men)	MSW
Swimming (Women)	WSW
Tennis (Men)	MTE
Tennis (Women)	WTE
Track (Men)	MTO
Track (Women)	WTO
Volleyball (Men)	MVB
Volleyball (Women)	WVB
Wrestling	MWR
Other (explain in remarks)	XOT

Non-Athletic Activities

Organization (Gr. 9-12)	Darken Circle (if applicable)
<u>Student Body Officer</u>	<input type="radio"/>
<u>Class President</u>	<input type="radio"/>
<u>Officer School Club</u>	<input type="radio"/>
<u>Member School Club</u>	<input type="radio"/>
<u>Editor School Publication</u>	<input type="radio"/>
<u>School Band/Chorus</u>	<input type="radio"/>
<u>Boys/Girls State</u>	<input type="radio"/>
<u>National Honor Society</u>	<input type="radio"/>
<u>Officer Non-School Club</u>	<input type="radio"/>
<u>Scouting</u>	<input type="radio"/>
<u>Civil Air Patrol/ROTC</u>	<input type="radio"/>
<u>Eagle Scout/Gold Award</u>	<input type="radio"/>
<u>Senior Patrol Leader</u>	<input type="radio"/>
<u>Other (specify)</u>	<input type="radio"/>

Athletic Activities

Sports Participation (Gr. 9-12) Use Codes in Instructions	# Years in sport (Gr. 9-12)	# Varsity Letters (Gr. 9-12)	Varsity Team Captain (# Years)	# Years Special Recognition (Explain in Remarks)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I also desire to compete for an ARMY ROTC Scholarship. Yes No

(USMA will share application information with Cadet Command electronically)

Are you a member of the U.S. Army? Yes No

If yes, which component? Active Duty Delayed Entry
 Reserves ROTC
 National Guard

I authorize release of my candidate information to my parents. Yes No

Have you ever been diagnosed with ADD or ADHD? Yes No

I authorize the Educational Testing Service and ACT to release any record of non-standard testing to Admissions, USMA. Yes No

Candidate Signature and Date:

Remarks: