Welcome to the United States Coast Guard Academy Class of 2017 Application!

USCGA applications are not part of the ApplyYourself (AY) network and therefore require you to create a unique username and password. Even if you already have an AY account that you've used to apply to another institution, you'll need to create a new one using the "create account" button (on the right) before you can access our applications. This new AY account allows you to save your progress on our applications, so that you can return to work on your applications over several sessions and transmit your information to us through a secure server. If you previously created an AY account to apply to our AIM Program, you can and should use that account to apply to the Class of 2017.

Please carefully read all instructions that appear throughout our applications. You can only submit an application once, so updates will need to be provided to the Admissions Office via e-mail for inclusion in your record. By accessing our applications, you are confirming that you have read and understand our Privacy Act Statement. All information submitted to USCGA, including your personal statements, is protected under the Privacy Act.

Privacy Act Statement: In accordance with 5 USC 552(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 or AIM Program; (3) Routine uses which may be made of the information: a) As background information on applicants for the selection process; b) To contact the applicant; c) The social security number may be used as a unique identifier; d) To determine if there are existing USCG records on the applicant; and e) In performance of the duties of officials and employees of the USCG, in managing and contributing to the USCGA or AIM Program selection process and tendering appointments to the same; (4) Disclosure of the information is voluntary, but the applicant will not be considered further if the information is not provided. Submissions of Evaluators will not be disclosed to the applicant without Evaluator consent. Release to any other individual/entity is only as required by law.

OMB No. 1625-0004 (Expires: mm/dd/yyyy): 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 240 minutes. You may submit comments concerning the accuracy of this estimate or any suggestions for reducing the burden to Admissions@uscga.edu.

User Login

Please input your login information below to open your application.

User Name: [   ]
Password: [   ]

[login]

🔄 Forgot your User Name or Password?

Create Account

If you are new to our application and do not already have a User Name, please click on the button below to register for a new account.

[create account]

▶ Technical Support

🔒 Security Information

◉ **Application System Requirements**

- Supported browsers include Internet Explorer 7, 8 & 9 (Windows), Firefox 3.6 & 7 (Mac), Firefox 3 and 7 (Windows), Chrome 12 (Windows and Mac), Safari 4 & 5 (Mac), and Safari 5 (Windows), (Macintosh users - OS X).
- While the majority of features will work with other browsers, we can only guarantee full compatibility and offer support for the browsers mentioned above.
- If you are using Internet Explorer 6, we strongly recommend upgrading to version 9 as version 6 does not meet our minimum security requirements.
- If you are using one of the supported browsers and are experiencing problems, we encourage you to upgrade to the latest version. If you still experience problems after upgrading, please make sure that your browser is set to accept cookies. Also, make sure the following browser settings are enabled:
    - JavaScript must be enabled.
    - Popup blockers must be disabled.
- If your browser has a section for trusted sites, please enter these two URLs:
    - http://app.applyyourself.com
    - https://app.applyyourself.com

- You will need Adobe Reader 6.0 or higher to download, view and print PDF files. While PDF files should work with most other PDF viewers, we can only guarantee full compatibility and support for Adobe Reader 6.0 or higher.
- If your email offers a whitelist, please add the following address:
  - support@hobsons.com
- For security reasons, we recommend that you should logout of the online application after each session.

☐ Main |☐ Logout

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Welcome, Testchris1! Your application is in progress.

Please read the Applicant Handbook, in the "Downloadable Forms" section, before beginning your application.

Thank you for your interest in the United States Coast Guard Academy's Class of 2017. This application must be completed online and submitted electronically. You do not have to complete your application in one sitting - you may save your progress and return to work on your application until it is ready to submit. You can quickly switch between sections of the application by using the navigational links located on the left side of the screen.

If possible, consider completing the "Recommendations" section first to allow those individuals to begin working on your letters of recommendation while you are working on your application. Once you have completed your application, use the "Submit" button located at the top of the page to begin the process of electronically sending your application to our office.

Please note that you can only submit your application once and, once submitted, you will not be able to make changes to your application using the online system; however, you may submit corrections via e-mail to Admissions@uscga.edu.

Your online application, personal statements, and all supplemental material must be submitted by February 1, 2013.

Details

**Testchris1 Testmcmunn1
User Name: testchris1**

USCGA 2017 Application

Submission Status:
Not Submitted

Last Date Accessed:
8/16/2012 5:38:31 PM EST

Helpful Hints

☐ Navigation Overview
☐ Technical Tips
☐ User License Agreement

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save   save & continue

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Applicant Information

Questions marked with an asterisk (*) are required and must be answered.

Name & Social Security Number

Legal First Name*

Legal Middle Name

Legal Last Name*

Suffix   Select One ▾

Social Security Number*
                          ###-##-####

Mailing Address

Mailing Address*

City*

State   Select One   ▾
                          Required if living in the U.S., U.S. Territories, or Armed Forces Regions.

Country*   Select One   ▾

Zip or Postal Code*
                          #####

Telephone Numbers & Email

Primary Phone Number
                          (###) ###-####; We recommend providing your home number

Alternate Phone Number
                          (###) ###-####; We recommend providing your cellular number

International Phone Number

Email Address*   chris.a.mcmunn@uscga.edu
                          Please ensure you provide an address that you will regularly maintain and
                          frequently check since we will send official correspondence via email
                          throughout the application process.

Personal Information

Height*
                          Inches

Weight*
                          Pounds

Date of Birth*
                          mm/dd/yyyy
                          You must be 17-22 years old on July 1, 2013 to apply for the Class of
                          2017.

Country of Birth*   Select One   ▾

City of Birth*

State of Birth   Select One   ▾
                          Required if born in the U.S.

Gender*   Select One ▾

Marital/Dependency Status*   Select One ▼

Citizenship*   Select One ▼

You must be a U.S. citizen to apply for the Class of 2017.
If you hold dual citizenship, please choose the other country below.

Other Country of Citizenship   Select One ▼

Are you fluent in another
language?*   ○ Yes ○ No

If you are fluent (you can read, speak, and write) in a language other than
English, please enter the other language(s) below.

Other Language(s)   [   ]

Are you of Hispanic or Latino ethnicity or heritage?*

                                 Select One ▼

Regardless of how you responded to the previous question, please select all races that best describe
you.

☐ African-American or Black (including Africa and the Caribbean)

☐ Asian (including Indian subcontinent and the Philippines)

☐ Native American or Alaska Native (including all original peoples
of the Americas)

☐ Native Hawaiian or Pacific Islander (original peoples)

☐ White (including Middle Eastern)

☐ Decline to answer

Did you attend the Academy
Introduction Mission Program?*   ○ Yes ○ No

The Academy Introduction Mission (AIM) Program is a one-week program
that students may attend the summer before their senior year of high
school.

Please select any other Admissions programs you have participated in.

☐ Academy Experience Program

☐ Admissions Briefing and Campus Tour

☐ Cadet for a Day

☐ Eclipse Week

☐ Genesis Invitational

☐ Guardian Challenge

☐ Open House

☐ Students Of All Races (SOAR) Program

☐ Science, Technology, Engineering Program (STEP)

Are you applying for Early Action consideration?*

                                 ○ Yes ○ No

The deadline to submit all required application items for Early Action Group
One is October 15, 2012; the deadline for Early Action Group Two is
November 15, 2012.

Have you previously applied to USCGA?*

                                 ○ Yes ○ No

If yes, please list the last year that you applied.

> yyyy

Have you ever been detained, arrested, summoned into court or participated in a diversion or probation program?*

○ Yes ○ No

If yes, please briefly explain.

Characters left in your response 120

Do you have any tattoos, brandings, or body piercings?*

○ Yes ○ No

If yes, please briefly describe.

Characters left in your response 120

Military Information

Are you currently or have you previously been an active duty or reserve member of the U.S. military?*

○ Yes ○ No

If yes, which branch of service?   [Select One ▼]

Highest Rank Held   [Select One ▼]

Have you previously applied to another federal service academy or ROTC program?*

○ Yes ○ No

Have you previously attended another federal service academy or ROTC program?*

○ Yes ○ No

[save] [save & continue] [reset]

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Family Information

Questions marked with an asterisk (*) are required and must be answered.

First Parent's Information

Are they living?*   ○ Yes ○ No

First Parent's First Name   [_____]

First Parent's Last Name   [_____]

Work Phone   [_____]
                                          (###) ###-####

Home Phone   [_____]
                                          (###) ###-####

International Phone Number   [_____]

Email Address   [_____]

Occupation   [_____]

Did this parent graduate from
college?*   ○ Yes ○ No

College(s) attended (if any)   [_____]

Highest Education Level   [Select One ▼]

Is this parent a graduate of one of the federal service academies?*
                                          [Select One ▼]

Is this parent currently an active duty or reserve member of the U.S. military?*
                                          ○ Yes ○ No

Was this parent ever an active duty or reserve member of the U.S. military?*
                                          ○ Yes ○ No

If yes to either of the two previous questions, which branch of service?
                                          [Select One ▼]

Highest Rank Held   [Select One ▼]

First Parent's Address

Does this parent have a different mailing address than you?
                                          ○ Yes ○ No

Mailing Address   [_____]

City   [_____]

State   [Select One ▼]
                                          Required if living in the U.S.

Country

Select One ▼

Zip or Postal Code [   ]
#####

Second Parent's Information

Are they living?*   ○ Yes ○ No

Second Parent's First Name   [   ]

Second Parent's Last Name   [   ]

Work Phone   [   ]
(###) ###-####

Home Phone   [   ]
(###) ###-####

International Phone Number   [   ]

Email Address   [   ]

Occupation   [   ]

Did this parent graduate from   ○ Yes ○ No
college?*

College(s) attended (if any)   [   ]

Highest Education Level   Select One ▼

Is this parent a graduate of one of the federal service academies?*
                                 Select One ▼

Is this parent currently an active duty or reserve member of the U.S. military?*

                                 ○ Yes ○ No

Was this parent ever an active duty or reserve member of the U.S. military?*

                                 ○ Yes ○ No

If yes to either of the two previous questions, which branch of service?
                                 Select One ▼

Highest Rank Held   Select One ▼

Second Parent's Address

Does this parent have a different mailing address than you?

                                 ○ Yes ○ No

Mailing Address   [   ]

City   [   ]

State   Select One ▼
                                Required if living in the U.S.

Country   Select One ▼

Zip or Postal Code   [   ]
#####

Other Information

Parent's Marital Status   Select One ▼

If you answered other, please
explain   [   ]

If not living with both/either parent
(s), with whom do you reside?   [   ]

Sibling Information

Do you have any siblings?*
    ○ Yes ○ No

[save] [save & continue] [reset]

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save   save & continue

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Sibling Information

Questions marked with an asterisk (*) are required and must be answered.

Oldest Sibling

First Name

Last Name

Age

Colleges(s) attended (if any)

Is this sibling attending or a graduate of one of the federal service academies?
Select One ▼

Is this sibling currently or were they previously an active duty or reserve member of the U.S. military?

○ Yes ○ No

If yes to the previous question, which branch of service?
Select One ▼

Highest Rank Held   Select One ▼

Sibling 2

First Name

Last Name

Age

Colleges(s) attended (if any)

Is this sibling attending or a graduate of one of the federal service academies?
Select One ▼

Is this sibling currently or were they previously an active duty or reserve member of the U.S. military?

○ Yes ○ No

If yes to the previous question, which branch of service?
Select One ▼

Highest Rank Held   Select One ▼

Sibling 3

First Name

Last Name

Age

Colleges(s) attended (if any)

Is this sibling attending or a graduate of one of the federal service academies?
Select One ▼

Is this sibling currently or were they previously an active duty or reserve member of the U.S. military?

○ Yes ○ No

If yes to the previous question, which branch of service?

Select One ▼

Highest Rank Held   Select One ▼

[save]   [save & continue]   [reset]

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Educational Information

Questions marked with an asterisk (*) are required and must be answered.

Current High School

Type of School*	Select One
CEEB Code*	[ ] Look up

If your home school program cannot be found using the "Look Up" function, please enter 777771 for your CEEB code. If you are a GED recipient, please enter 777774 for your CEEB code.

School Name*	[ ]
School Address*	[ ]
City*	[ ]
State	Select One
Country*	Select One
Zip or Postal Code	[ ] #####
Telephone Number	[ ] (###) ###-####
Attended From*	[ ] mm/yyyy
Graduation Date*	[ ] mm/yyyy
Have you attended another high school?*	○ Yes ○ No

Previous High School

Type of School	Select One
CEEB Code	[ ] Look up

If your home school program cannot be found using the "Look Up" function, please enter 777771 for your CEEB code. If you are a GED recipient, please enter 777774 for your CEEB code.

School Name	[ ]
School Address	[ ]
City	[ ]
State	Select One
Country	[ ]
Zip or Postal Code	[ ] #####
Telephone Number	[ ] (###) ###-####
Attended From	[ ] mm/yyyy
Attended To	[ ] mm/yyyy

Colleges and Universities

College Code   [   ] [Look up]

College/University Name   [   ]

City   [   ]

State   [Select One   ▼]

Zip or Postal Code   [   ]
                                #####

Attended From   [   ]
                                mm/yyyy

Attended To   [   ]
                                mm/yyyy

Current Coursework

Please list the courses you are currently taking or plan to take and complete prior to July 2013.
You may enter up to eight courses.

Course Name 1   [   ]

Course Name 2   [   ]

Course Name 3   [   ]

Course Name 4   [   ]

Course Name 5   [   ]

Course Name 6   [   ]

Course Name 7   [   ]

Course Name 8   [   ]

Academic Information

If appointed, you will be assigned an academic advisor within your intended major. What is your
intended major?*

                                [Select One   ▼]

Are you a member of the National   ○ Yes ○ No
Honor Society?*

Briefly list any academic honors you received while in high school or college. Additional academic
honors information may be provided in your optional personal statement.

                                [▲]
                                [   ]
                                [   ]
                                [▼]
                                Characters left in your response 120

Standardized Test Scores

If you have already taken either the SAT or ACT exam, self-reporting your highest combined
scores will expedite review of your application; however, these test scores are considered
unofficial. Official scores must still be submitted either directly from the ACT/College Board or
recorded on your high school transcript.

SAT Critical Reading Score   [   ]

SAT Math Score   [   ]

SAT Writing Score

ACT English Score

ACT Math Score

ACT Writing Score

Will you or did you receive any special accommodations - such as extended or unlimited time - when taking the SAT Reasoning or ACT exam?*

○ Yes ○ No

If yes, please briefly explain

Characters left in your response 120

save   save & continue   reset

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Extracurricular Information

* Indicates a required field

Activity 1

Please list the six most meaningful activities that you have participated in during your time in high school or college (in order of importance to you).

Activity*   [Select One ▼]

If other, please explain   [ ]

Grade Level Participated*
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ Post High School

Varsity Letter
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ Post High School

Team Captain
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ Post High School

Leadership Position
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ Post High School

Achievements   [ ]

If offered, I plan to participate in this activity at the Academy   ○ Yes ○ No

Coach/Advisor Name   [ ]

Coach/Advisor Telephone Number   [ ]
(###) ###-####

Activity 2

Activity   [Select One ▼]

If other, please explain   [ ]

Grade Level Participated
- ☐ 9
- ☐ 10

☐ 11
☐ 12
☐ Post High School

Varsity Letter

☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Team Captain

☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Leadership Position

☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Achievements

If offered, I plan to participate in this activity at the Academy
○ Yes ○ No

Coach/Advisor Name

Coach/Advisor Telephone Number
(###) ###-####

Activity 3

Activity
Select One

If other, please explain

Grade Level Participated

☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Varsity Letter

☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Team Captain

☐ 9
☐ 10
☐ 11
☐ 12

☐ Post High School

Leadership Position
☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Achievements
[   ]

If offered, I plan to participate in this activity at the Academy
○ Yes　○ No

Coach/Advisor Name
[   ]

Coach/Advisor Telephone Number
[   ]
(###) ###-####

Activity 4

Activity
[Select One ▼]

If other, please explain
[   ]

Grade Level Participated
☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Varsity Letter
☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Team Captain
☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Leadership Position
☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Achievements
[   ]

If offered, I plan to participate in this activity at the Academy
○ Yes　○ No

Coach/Advisor Name
[   ]

Coach/Advisor Telephone Number
[   ]

(###) ###-####

Activity 5

Activity	Select One ▼

If other, please explain

Grade Level Participated
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ Post High School

Varsity Letter
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ Post High School

Team Captain
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ Post High School

Leadership Position
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ Post High School

Achievements

If offered, I plan to participate in this activity at the Academy　　○ Yes　○ No

Coach/Advisor Name

Coach/Advisor Telephone Number

(###) ###-####

Activity 6

Activity	Select One ▼

If other, please explain

Grade Level Participated
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ Post High School

Varsity Letter
- ☐ 9
- ☐ 10
- ☐ 11

☐ 12
☐ Post High School

Team Captain

☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Leadership Position

☐ 9
☐ 10
☐ 11
☐ 12
☐ Post High School

Achievements

If offered, I plan to participate in this activity at the Academy   ○ Yes ○ No

Coach/Advisor Name

Coach/Advisor Telephone Number

(###) ###-####

Work Experience

List up to two jobs you have held during the past three years.

Specific nature of work

Employer

Employed From

mm/yyyy

Employed To

mm/yyyy

Approximate number of hours worked per week

Employer Telephone Number

(###) ###-####

Work Experience 2

Specific nature of work

Employer 2

Employed From

mm/yyyy

Employed To

mm/yyyy

Approximate number of hours worked per week

Employer Telephone Number

(###) ###-####

[save] [save & continue] [reset]

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Additional Information

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USCGA Information

How did you first learn about the   Select One   ▼
Coast Guard Academy?*

Detailed Source   ▼

save   save & continue   reset

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School Logo Here
160 x 70 pixels

⌂ Home   ✖ Tech Support   📄 Update Profile   ✓ Submit

▢**main** ▍▢**logout**

save   save & continue

Section 1
Section 2
Section 3

Personal Statements

Questions marked with an asterisk (*) are required and must be answered.

Any information submitted in your personal statements is protected to the extent allowed under the Privacy Act. These statements will only be reviewed by Coast Guard Academy faculty and staff, during our review of your record, to learn about your background and readiness to be successful at USCGA.

Privacy Act Statement: In accordance with 5 USC 552(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 or AIM Program; (3) Routine uses which may be made of the information: a) As background information on applicants for the selection process; b) To contact the applicant; c) The social security number may be used as a unique identifier; d) To determine if there are existing USCG records on the applicant; and e) In performance of the duties of officials and employees of the USCG, in managing and contributing to the USCGA or AIM Program selection process and tendering appointments to the same; (4) Disclosure of the information is voluntary, but the applicant will not be considered further if the information is not provided. Submissions of Evaluators will not be disclosed to the applicant without Evaluator consent. Release to any other individual/entity is only as required by law.

Personal Statement #1*

Explain why you are interested in attending the Coast Guard Academy and what you expect to get out of your four years as a Cadet. Articulate other goals you have established for yourself and your efforts to accomplish them. Give at least one example that demonstrates your work ethic and diligence. (Limit 500 words on a single page)

To upload a document in response to this question, please click the 'upload' button below. If your upload is successful, you will see a 'view document' button and a 'delete' button appear next to the question.

upload document

Personal Statement #2*

The Coast Guard Academy's mission is to develop leaders of character. Describe examples of your leadership experience from the past three years in which you have significantly influenced others, helped resolve disputes, or contributed to group efforts over time. (Limit 250 words on a single page)

To upload a document in response to this question, please click the 'upload' button below. If your upload is successful, you will see a 'view document' button and a 'delete' button appear next to the question.

upload document

Personal Statement #3*

Describe your experience facing or witnessing discrimination or unfair treatment. Tell us how you responded, what you learned from those experiences, and how you believe they prepared you to contribute to the Coast Guard Academy community. (Limit 250 words on a single page)

To upload a document in response to this question, please click the 'upload' button below. If your upload is successful, you will see a 'view document' button and a 'delete' button appear next to the question.

upload document

Personal Statement #4

Provide any additional information about yourself that you feel we need to know and that you have not provided elsewhere in your application. In addition to providing a personal statement, not to exceed a single page, you may upload copies of supplemental information that you would like added to your record. (Limit 2500KB upload)

To upload a document in response to this question, please click the
'upload' button below. If your upload is successful, you will see a 'view
document' button and a 'delete' button appear next to the question.

upload document

save   save & continue   reset

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You must identify and provide contact information for the four individuals who will be providing the following required application items before you may submit your application:
● Your guidance counselor, or an appropriate school official, must submit an official high school transcript and school profile along with a letter of recommendation.
● Your current English instructor, or your English instructor from last year, must submit a letter of recommendation.
● Your current mathematics instructor, or your math instructor from last year, must submit a letter of recommendation.
● A sports coach, physical education instructor, or active duty military member must administer and submit results from your Physical Fitness Examination. Provide this individual the PFE Manual, available in the "Downloadable Forms" section, in advance so they are prepared to administer your exam.
You may identify and provide contact information for two individuals to submit optional letters of recommendation.

Any individual submitting a letter of recommendation for your application <u>must</u> submit it electronically through the AY online system to ensure it is added to your record.

My Recommendations

A recommendation provider is an individual who will complete and submit a recommendation form on your behalf.

To add your recommendation providers:

● Select the "My Recommendations" button above.
● Select the "Add" button to insert the name, e-mail address, and type of recommendation for each of your providers.
● Once the requested information is saved, an e-mail message will be sent to each recommendation provider with an access code and instructions for uploading your recommendation.
● You can view the status of your recommendation requests from your application homepage and send reminder messages to providers or reassign recommendation requests.

Application Home   Technical Support   Update Profile   Logout

Additional Information

● Recommendation requests are valid for 180 days.

● Recommendation providers must have unique and valid e-mail addresses.

● High school transcripts and school profiles are the only required recommendation items that may be submitted offline.

● If you completed the PFE while attending AIM 2012, you may use those results by listing "AIM Program" as the name of your PFE Administrator and entering "AIMPFE@uscga.edu" as the e-mail address.

☐ **Main** |☐ **Logout**

🏠 Home   ✖ Tech Support   📄 Update Profile   ✓ Submit

USCGA 2017 Application

Applicant Information
Family Information
Sibling Information
Educational Information
Extracurricular Information
Additional Information
Personal Statements

Recommendations

Downloadable Forms

Check Your Application

🖨 print

You must identify and provide contact information for the four individuals who will be providing the following required application items before you may submit your application:

● Your guidance counselor, or an appropriate school official, must submit an official high school transcript and school profile along with a letter of recommendation.
● Your current English instructor, or your English instructor from last year, must submit a letter of recommendation.
● Your current mathematics instructor, or your math instructor from last year, must submit a letter of recommendation.
● A sports coach, physical education instructor, or active duty military member must administer and submit results from your Physical Fitness Examination. Provide this individual the PFE Manual, available in the "Downloadable Forms" section, in advance so they are prepared for your exam.

If you completed the PFE while attending AIM 2012, you may use those results by listing "AIM Program" as your PFE Administrator and using "AIMPFE@uscga.edu" as the e-mail address. **In addition, you may identify and provide contact information for up to two individuals to submit optional letters of recommendation; these letters may come from any source.**

Any individual submitting a letter of recommendation for your application must submit it electronically through the AY online system to ensure it is added to your record. **Your application will not be considered complete, and therefore will not be reviewed, until all four of the required items listed above are received via the AY online system.**

My Recommendations

My Recommendations	Status

No Recommendation Providers have been entered yet. Click the button below to identify one of your Recommendation Providers.

add

Please note that notification emails will indicate "United States Coast Guard Academy" as the sender but will come from support@hobsons.com. If they use a spam-blocking tool, please ask them to add this email address to their list of known/safe addresses.

Application Home   Technical Support   Update Profile   Logout

☐ **Main** |☐ **Logout**

🏠 Home   ✖ Tech Support   📄 Update Profile   ✓ Submit

USCGA 2017 Application

Applicant Information
Family Information
Sibling Information
Educational Information
Extracurricular Information
Additional Information
Personal Statements

Recommendations

Downloadable Forms

Check Your Application

🖨 print

Please Complete the Following

Recommender First Name*

Recommender Last Name*

Phone:

(###) ###-#### for a U.S. number

Email Address*

Title:

How long have you known
this recommender?:

Relationship to you*   -- Select --

Do you wish to waive your right to examine this letter of recommendation?*

○ Yes

○ No

Under the Family Educational Rights and Privacy Act of 1974, students have access to their education record, including letters of recommendation. However, students may waive their right to see letters of evaluation, in which case the letters will be held in confidence.

* *indicates a required field*

If you would like to include a personal note in the notification email that is delivered, please use the space below:

save

Application Home   Technical Support   Update Profile   Logout

McMunn, Chris

Dear <Evaluator>,

This student is in the process of applying to the United States Coast Guard Academy. They
have requested that you complete a short online evaluation form and provide a letter of
recommendation for their application.

The United States Coast Guard Academy only accepts letters of recommendation submitted
electronically, so please upload your recommendation by following the link below. The
provided personal access code and initial password are required to access this student's
record and all letters of recommendation must be submitted by November 15, 2012 for Early
Action consideration or February 1, 2013 for Regular Admissions.

Thank you for your time and assistance.

Please note that Testchris1 Testmcmunn1 has waived his/her right to review this letter of
Recommendation.

Submit your letter of Recommendation at:
https://rec.applyyourself.com/?CID=174&code=UMHGJCYXISB

Personal Access Code: UMHGJCYXISB
Initial Password: <InitialPassword>

Name of Applicant: Testchris1 Testmcmunn1
Department/Major: <IntendedMajor>

For security purposes, please keep your Personal Access Code and Password confidential and do
not share them with the applicant.

You will use the password from this email for your initial login. Once you login, you will
be required to change your password to something that you select for security reasons. You
will receive another email with your updated password.   Please do not send your
Recommendation as an attachment in response to this notification message.

Thank You,

United States Coast Guard Academy

This message was sent by Hobsons on behalf of United States Coast Guard Academy at the
request of Testchris1 Testmcmunn1 (chris.a.mcmunn@uscga.edu)

If you are unable to follow the link above, copy and paste the following web address into
your browser:
https://rec.applyyourself.com

For technical support, please access
http://rec.applyyourself.com/AYContactHelpDesk/TechSupport.asp?packageType=Recommendation&ca=
uscga&p=UMHGJCYXISB

Logging In

Your **Personal Access Code** is listed in your notification email. This information is valid for 180 days from the time the email is sent.

Please log out after each session.

Need Help?

The ApplyYourself Recommendation Center is for individuals who have been asked to submit letters of recommendation by an applicant applying to an ApplyYourself Member institution. Please input your login information in the space provided below to access the institution's recommendation form. You will need to input the Personal Access Code and Password listed in your notification email. The Personal Access Code is valid for 180 days from the date of your notification email.

- Your Personal Access Code can be found in your notification email. You must enter the code exactly as it appears in the email.
- Your Password can also be found in your notification email. However, you are required to change your password upon your initial login for security reasons.

Please enter your information and click the Login button

Personal Access Code OAJDOSJZTVA

Password

Login

Forgot your access code and/or password?

IMPORTANT INFORMATION ABOUT BROWSERS
Please use Firefox, Internet Explorer, Chrome, or Safari browsers for this process. Do NOT use AOL's internal browser. Download Browsers

Need Help?

Change Password

For security reasons, you need to change your password upon first login.

Please use the fields below to change your password. Your password must be between 8 and 20 characters in length. You must choose at least one letter and at least one number. Please use letters and numbers only and remember that the password is case sensitive. To locate your current password, please refer to the invitation email you received.

Once you successfully change your password, you will receive an email with your updated password.

Current Password*:
New Password*:
Confirm Password*:

* *indicates a required field*

[update]

You are here

Get Started
  Personal Information

Preview and Submit

Status

Not Submitted

Applicant Information

Name:
Testchris Testmcmunn

Email:
chris.a.mcmunn@uscga.edu

Institution:
United States Coast Guard Academy

Department/Major:
Government

more info **>>**

Get Started

Please use either the navigational buttons at the bottom or the navigational links on the right side of the screen to complete your online recommendation. Please save your work frequently and, once finished and ready to submit your recommendation, select the "Preview and Submit" option to begin a two-step submission process.

By accessing our recommendation system, you are confirming that you have read and understand our Privacy Act Statement. All information submitted to USCGA, including your letter of recommendation, is protected under the Privacy Act.

Privacy Act Statement: In accordance with 5 USC 552(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 or AIM Program; (3) Routine uses which may be made of the information: a) As background information on applicants for the selection process; b) To contact the applicant; c) The social security number may be used as a unique identifier; d) To determine if there are existing USCG records on the applicant; and e) In performance of the duties of officials and employees of the USCG, in managing and contributing to the USCGA or AIM Program selection process and tendering appointments to the same; (4) Disclosure of the information is voluntary, but the applicant will not be considered further if the information is not provided. Submissions of Evaluators will not be disclosed to the applicant without Evaluator consent. Release to any other individual/entity is only as required by law.

OMB No. 1625-0004 (Expires: mm/dd/yyyy): 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 75 minutes. You may submit comments concerning the accuracy of this estimate or any suggestions for reducing the burden to Admissions@uscga.edu.

Read Full Overview >>

Status: Not Submitted

Last Accessed	8/29/2012 10:30:44 AM EST
Personal Access Code	GAHBMRMBBPJ
Password	Click here to change your password

Next >>

You are here

Get Started

Personal Information

Preview and Submit

Status

Not Submitted

Applicant Information

Name:

Testchris Testmcmunn

Email:

chris.a.mcmunn@uscga.edu

Institution:

United States Coast Guard Academy

Department/Major:

Government

more info **>>**

Personal Information

Questions marked with an asterisk (*) are required and must be answered.

Applicant Information

Applicant First Name*

Applicant Last Name*

Recommender Information

Recommender Name*

Title*

Occupation*

Phone Number*

(###) ###-#### for a U.S. number

Email Address*

How long have you known this student?*   Select One

In what capacity have you known this student?*

Characters left in your response 300

Which recommendation are you submitting?*   Please Select

<< Go Back   Save   Next >>

Academic Information

Questions marked with an asterisk (*) are required and must be answered.

You are here

- Get Started
  - Personal Information
- Academic Information
  - Letter of Recommendation
- Preview and Submit

High School Information

Status

Not Submitted

Type of School*   Select One

CEEB Code*   [   ] Look up

School Name*   [   ]

School Address*   [   ]

City*   [   ]

State   Select One

Country*   Select One

Zip or Postal Code*   [   ]
                         #####

Telephone Number*   [   ]
                         (###) ###-#### for a U.S. number

Applicant Information

Name:
Testchris Testmcmunn

Email:
chris.a.mcmunn@uscga.edu

Institution:
United States Coast Guard Academy

Department/Major:
Government

more info >>

Applicant Information

Month/Year of Graduation*   [   ]
                             mm/yyyy

Cumulative GPA*   [   ]

GPA Scale (4.0, 100, etc.)* [   ]

Rank in Class   [   ]

Number of Students in
Class*   [   ]

If class rank is unavailable,
please indicate approximate   [   ]
percentile (e.g. Top 10%)

Percentage of class
expected to attend a four   [ ]
year college*

Please upload a copy of your school's profile and this student's most recent transcript, including any standardized test scores. If you are unable to upload electronic copies of these documents, please still complete/submit this online recommendation and then mail the school profile and student transcript to: Director of Admissions (tp), U.S. Coast Guard Academy, Admissions Office, 31 Mohegan Avenue, New London, CT 06320

High School Transcript   To upload a document in response to this question, please click the 'upload' button below. If your upload is successful, you will see a 'view document' button and a 'delete' button appear next to the question.

upload document

<< Go Back   Save   Next >>

You are here

Letter of Recommendation

Questions marked with an asterisk (*) are required and must be answered.

Letter of Recommendation*   Please upload a letter of recommendation concerning this student's aptitude to perform at the United States Coast Guard Academy. Depending upon your relationship with the student, please address their academic readiness to be successful in a rigorous technical curriculum infused with writing requirements and their demonstrated leadership, respect and compassion towards others.

To upload a document in response to this question, please click the 'upload' button below. If your upload is successful, you will see a 'view document' button and a 'delete' button appear next to the question.

upload document

<< Go Back   **Save**   **Next >>**

Get Started

Personal Information

Letter of Recommendation

Preview and Submit

Status

Not Submitted

Applicant Information

Name:
Testchris Testmcmunn

Email:
chris.a.mcmunn@uscga.edu

Institution:
United States Coast Guard Academy

Department/Major:
Government

more info **>>**

Physical Fitness Examination

Questions marked with an asterisk (*) are required and must be answered.

You are here

Get Started

Personal Information

Physical Fitness Examination

Preview and Submit

Body Measurements

Height*

[   ]
Inches

Weight*

[   ]
Pounds

Status

Not Submitted

Exam Results

Cadence Push-Ups* [   ]

Cadence Push Ups Score* [   ]

Sit-Ups* [   ]

SitUps Score* [   ]

1.5 Mile Run Time* [   ] : [   ]
mm   ss

1.5 Mile Score* [   ]

PFE Score* [   ]

Applicant Information

Name:
Testchris Testmcmunn

Email:
chris.a.mcmunn@uscga.edu

Institution:
United States Coast Guard Academy

Department/Major:
Government

more info >>

Comments*

Please provide any comments you would like to share about the conditions the PFE was administered under or the applicant's overall physical fitness level and readiness to be successful in a military training environment.

[text area]

Characters left in your response 300

Date of PFE* [   ]
mm/dd/yyyy

<< Go Back | Save | Next >>