



For Internet Explorer users, please be sure to turn off compatibility mode for optimal viewing.

Welcome to the United States Coast Guard Academy Application Portal!

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 for direct entry to the Academy; however, if you previously applied for direct entry to the Academy, you must create a new account using the "create account" button in order to reapply for admission this year.

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 is used by the Department of Defense Medical Examination Review Board 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 may 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.

USCGA Application: OMB No. 1625-0004 (Expires: 8/31/2015): 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.

AIM Application: OMB No. 1625-0121 (Expires: 2/28/2018): 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 180 minutes. You may submit comments concerning the accuracy of this estimate or any suggestions for reducing the burden to Admissions@uscga.edu.

Create Account User Login

Please input your login information below to open your application.
User Name
Password
login
Forgot your User Name or Password?



Create An Application Account

Thank you for your interest in applying for admission to the Class of 2019. The application will open in August 2014 and close on January 15, 2015. Your first step is to create an application account which will allow you to receive further communication from our Admissions Office and access the application during the time period listed above. You may complete this step even before the application opens and then update your account information later if it changes. Please provide as much information as possible, taking special notice of all required fields denoted with an asterisk (*).

NOTE: If you previously created an application account in order to apply for the Academy Introduction Mission (AIM) Program, please do not create a new account. You should use your AIM application account to access the Class of 2019 application; however, if you have previously applied for direct entry to the Academy, you must create a new account in order to reapply for admission this year.

Basic Information

Full Name

First Name *

Middle Name

Last Name *

Gender *

Male

Female

Street Address 1 *

Street Address 2

Country *

Select One ▼

City *

Zip/Postal Code *

#####

Phone *

Email Address *

Verify Email Address *

Birthdate *

Month ▼ Day ▼ Year ▼

Login Information

Please create your user name and password in the space below. This information will be used to access your online application.

User Name *

Password *

Passwords must be between 8-30 characters, contain at least 1 uppercase letter (A-Z), 1 lowercase letter (a-z), 1 number (0-9), and 1 of the following special characters: !@#\$%^&*()_+|~-=\`{}[]:";<>?,./ Spaces are not allowed.

Verify Password *

Submit Information






My Application(s)

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EDIT APPLICATION

APPLICATION STATUS: NOT SUBMITTED 

AIM Program Application (Deadline Has Passed)  Start Application

APPLICATION STATUS: NOT STARTED 



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Welcome, Shaelin! 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 2019. 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 Application" 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 required supplemental material must be submitted by October 15, 2014 for your record to be reviewed under Early Action. Early Action applicants will receive their admission decision by December 24, 2014.

Your online application, personal statements, and all required supplemental material must be submitted by January 15, 2015 for your record to be reviewed under Regular Admissions. All applicants will receive their admission decision by April 1, 2015.

★ START APPLICATION

Submit Application



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Save Save & Continue

Applicant Information

Applicant Information

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

Name & Social Security Number

Legal First Name* Shaelin
Legal Middle Name
Legal Last Name* McMunn
Suffix Select One
Social Security Number* ### ## ####

Mailing Address

Mailing Address* 31 Mohegan Avenue
City* New London
State Connecticut
Country* United States
Zip or Postal Code* 06320

Telephone Numbers & Email

Primary Phone Number (860) 701-6778
Alternate Phone Number
International Phone Number
Email Address* chris.a.mcmunn@uscga.edu

Personal Information

Height* Inches
Weight*

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Pounds

Please see Applicant Handbook for weight standards.

Date of Birth*

01/01/1995

mm/dd/yyyy

You must be 17-22 years old on June 29, 2015 to apply.

Country of Birth*

Select One

City of Birth*

State of Birth

Select One

Required if born in the U.S.

Gender*

Female

Marital/Dependency Status*

Select One

Citizenship*

Select One

You must be a U.S. citizen to apply for the Class of 2019.

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 Enlisted Selection Opportunity Program (AESOP)
- Admissions Briefing and Campus Tour
- Cadet for a Day (Overnight)
- 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 is October 15, 2014;

the deadline for Regular Admissions is January 15, 2015.

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 300

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

Yes No

If yes, please briefly describe.

Characters left in your response 300

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 ▾

Prior to this year, did you apply to another federal service academy?*

Yes No

Prior to this year, did you attend another federal service academy?*

Yes No

Save

Save & Continue

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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

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

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?

Highest Rank Held

First Parent's Address

Does this parent have a different mailing address than you?

Yes No

If this parent has a different mailing address, please enter it below.

Mailing Address

City

State

Required if living in the U.S.

Country

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 college? Yes No

College(s) attended (if any)

Highest Education Level

Is this parent a graduate of one of the federal service academies?

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?

Highest Rank Held

Second Parent's Address

Does this parent have a different mailing address than you?

Yes No

If this parent has a different mailing address, please enter it below.

Mailing Address

City

State

Required if living in the U.S.

Country

Zip or Postal Code

#####

Other Information

Parents' Martial Status

If "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

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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*

Text input field

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*

Text input field

School Address*

Text input field

City*

Text input field

State

Select One

Country*

Select One

Zip or Postal Code

Text input field

#####

Telephone Number

Text input field

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

Attended From*

Text input field

mm/yyyy

Graduation Date*

Text input field

mm/yyyy

Have you attended another high school?*

Yes No

Previous High School

Type of School

Select One

CEEB Code

Text input field

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

Text input field

School Address

Text input field

City

Text input field

State

Select One

Country

Zip or Postal Code
#####

Telephone Number
(###) ### ####

Attended From
mm/yyyy

Attended To
mm/yyyy

Colleges and Universities

College Code

College/University Name

City

State

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 2015.

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?*

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

Briefly list any academic honors you received while in high school or college. Additional academic honors information may be provided in a resume or other material included in your optional upload available in the Personal Statements section.

Characters left in your response 300

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 received either directly from the ACT/College Board or recorded on your high school transcript in order for your application to be considered complete and eligible for review.

| | |
|----------------------------|----------------------|
| SAT Critical Reading Score | <input type="text"/> |
| SAT Math Score | <input type="text"/> |
| SAT Writing Score | <input type="text"/> |
| ACT English Score | <input type="text"/> |
| ACT Math Score | <input type="text"/> |
| ACT Writing Score | <input type="text"/> |

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 300

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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*

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

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

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

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

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

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

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Additional Information

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

USCGA Information

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

Select One ▼

Detailed Source

▼

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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)

Upload Document e.g. .doc, .pdf, .txt, .xls More

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)

Upload Document e.g. .doc, .pdf, .txt, .xls More

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)

Upload Document e.g. .doc, .pdf, .txt, .xls More

Personal Statement #4 Provide any additional information, including why you believe that you should be tendered an appointment, about yourself that you feel we need to know and that you have not provided elsewhere in your application. (Limit 250 words on a single page)

Upload Document e.g. .doc, .pdf, .txt, .xls More

Optional Upload Additional Material: Provide a resume or any other supplemental material that you would like added to your record. (Limit 2500KB upload)

Upload Document e.g. .doc, .pdf, .txt, .xls More

High School Transcript: Please upload your most recent transcript including all final grades and coursework in progress. If recommended for an appointment, you will be required to submit an official transcript directly from your high school.

Upload Document e.g. .doc, .pdf, .txt, .xls More

College Transcript: Please upload your most recent transcript including all final grades and coursework in progress. If recommended for an appointment, you will be required to submit an official transcript directly from your college.

Upload Document

e.g. .doc, .pdf, .txt, .xls [More](#)

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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. Please enter your recommenders in the following order:

- #1 - Your school counselor, or an appropriate school official, who will submit a school profile along with a letter of recommendation. They may also provide an official transcript, including any standardized test scores, but this is optional since only the unofficial transcript you are required to upload in the "Personal Statements" section is required for your record to be reviewed.
- #2 - Your current English instructor, or your instructor from last year, who will submit a letter of recommendation. You may use an instructor from any humanities course with writing requirements, if an English instructor is not available.
- #3 - Your current mathematics instructor, or your instructor from last year, who will submit a letter of recommendation. You may use an instructor from any science, technology, or engineering course, if a mathematics instructor is not available.
- #4 - A sports coach, physical education instructor, or active duty military member who will administer and submit results from your Physical Fitness Examination; contact your Admissions Officer for alternates if one of these individuals is not available. Provide this individual the PFE Manual, available in the "Downloadable Forms" section, in advance so they are prepared to administer your exam.

After adding the four required recommenders listed above, you may identify and provide contact information for up to two individuals to submit optional letters of recommendation; however, since these letters are not required, your record may be considered complete and reviewed prior to their submission if all required items have been received.

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. Paper letters of recommendation will neither be accepted nor added to your record, so 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

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 A Provider" button to insert the name, e-mail address, and type of recommendation for each of your providers.
- Once the recommenders' information is provided, an e-mail message will be sent to each individual with an embedded link and instructions for uploading their recommendation.
- You can view the status of recommendation requests from your application homepage and either send reminder messages to providers or reassign recommendation requests from the "My Recommendations" section.

Additional Information

- Recommendation requests are valid for 180 days.
- Your recommendation providers must have unique and valid e-mail addresses.
- High school profiles are the only required recommendation item that may be submitted offline.
- If you completed the Physical Fitness Examination while attending AIM 2014, and would like to use those results and not retake the exam, you must list "AIM Program" as the name of your PFE Administrator and "AIMPFE@uscga.edu" as the e-mail address.



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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. Please enter your recommenders in the following order:

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- Educational Information
- Extracurricular Information
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- #1 - Your school counselor, or an appropriate school official, who will submit a school profile along with a letter of recommendation. They may also provide an official transcript, including any standardized test scores, but this is optional since only the unofficial transcript you are required to upload in the "Personal Statements" section is required for your record to be reviewed.
- #2 - Your current English instructor, or your instructor from last year, who will submit a letter of recommendation. You may use an instructor from any humanities course with writing requirements, if an English instructor is not available.
- #3 - Your current mathematics instructor, or your instructor from last year, who will submit a letter of recommendation. You may use an instructor from any science, technology, or engineering course, if a mathematics instructor is not available.
- #4 - A sports coach, physical education instructor, or active duty military member who will administer and submit results from your Physical Fitness Examination; contact your Admissions Officer for alternates if one of these individuals is not available. Provide this individual the PFE Manual, available in the "Downloadable Forms" section, in advance so they are prepared to administer your exam.

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If you completed the Physical Fitness Examination while attending AIM 2014, you must list "AIM Program" as your PFE Administrator and use "AIMPFE@uscga.edu" as the e-mail address to request the results be added to your Class of 2019 application.

After adding the four required recommenders listed above, you may identify and provide contact information for up to two individuals to submit optional letters of recommendation; however, since these letters are not required, your record may be considered complete and reviewed prior to their submission if all required items have been received.

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. Paper letters of recommendation will neither be accepted nor added to your record, so 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

Editing Requests: If you need to edit a recommendation request before it has been submitted, you must first delete the existing request and then submit a new one. Select the red "X" button located above and to the right of the provider's name and confirm you wish to delete the existing request before submitting a new request. Recommendation requests may not be deleted after the recommendation has been submitted.

Resending Notifications: If you wish to have an e-mail message sent to a provider to remind them to complete their letter of recommendation, or the provider cannot find the initial e-mail with instructions for submitting your recommendation, select the "Resend" button to the right of their name.

+ ADD A PROVIDER

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



USCGA Application

Add A recommendation Provider

Add Provider

USCGA 2019 Application

* indicates a required question

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

Important Links

- Recommendations
- Downloadable Forms
- Check Your Application
- Application Instructions

PRINT FORMS

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*

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.

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

Add Provider