

# West Point Candidate Questionnaire

[Name here]

SSN / West Point ID: \*\*\*\*\*/\*\*\*\* / XXXXXXXX

Date: 08/08/2016

Address: 1 Road Street  
City, State, Zip: WEST POINT, NY 10996 - 1700 US  
Phone / Cell: (555) 555-5555 /  
E-Mail Address: EMAIL@EMAIL.EDU  
Date of Birth / Citizenship: XX/XX/199X /  
Gender:  
Birth Race/Ethnicity:

## Congressional

State/District:

## High School

Name/ETS Code: Grad Year: Rank/Nbr In Class:

## Standardized Tests

PSAT: Verbal: Math:  
SAT: Verbal: Math:  
ACT: English: 4 Math: 4 Reading: 4 Sci/Rea: 4

## Athletic Activities

Primary Sport: Years: Varsity Ltrs: Team Cpt: Spec Recog:  
Secondary Sport: ---  
Other Sports: ---

## Non-Athletic Activities

## Military Service

Member of Armed Services?  
Combat Veteran?

## Release of Info Authorization

Parental Release?  
Diagnosed w/ADD or ADHD?  
Corrective eye surgery?  
Release to Edu Testing Svc?

Remarks:

## Other Colleges

Compete For ARMY ROTC Scholarship?  
Colleges Applied To: ---  
Majors at other schools: ---