

CHRISTOPHER H. SMITH
4TH DISTRICT, NEW JERSEY

CONSTITUENT SERVICE CENTERS:
MONMOUTH
112 Village Center Drive
Freehold, NJ 07728-2510
(732) 780-3035

OCEAN
405 Route 539
Plumsted, NJ 08514-2303
(732) 350-2300; (609) 286-2571

MERCER
4573 South Broad Street
Hamilton, NJ 08620-2215
(609) 585-7878



Congress of the United States
House of Representatives

SENIOR MEMBER, FOREIGN AFFAIRS
COMMITTEE

CHAIRMAN, AFRICA, GLOBAL HEALTH,
GLOBAL HUMAN RIGHTS, AND
INTERNATIONAL ORGANIZATIONS
SUBCOMMITTEE

WESTERN HEMISPHERE
SUBCOMMITTEE

CHAIRMAN, COMMISSION ON SECURITY AND
COOPERATION IN EUROPE

CHAIRMAN, CONGRESSIONAL-EXECUTIVE
COMMISSION ON CHINA

DEAN, NEW JERSEY DELEGATION

Note: Do not staple any pages of this application together

2020 • SERVICE ACADEMY NOMINATION APPLICATION

PLEASE PRINT LEGIBLY

If you have applied to more than one academy, Military___ Naval___ Air Force___ Merchant Marine___
list preference (i.e., 1st, 2nd choice):

Candidate Numbers: Military_____ Naval_____ Air Force_____ Merchant Marine_____

Date of Physical Aptitude Exam_____ Date of DODMERB exam _____

Do you have any reason to believe you may be disqualified
for medical, scholastic or other reasons? Yes No Do you plan to make
military service a career? Yes No

Full Legal Name _____

Legal Residence _____

City/Town _____ Zip _____ County _____

Your Cell Phone _____ Parent Phone _____

You Email _____ Parent Email _____

Date of Birth____/____/____ Place of Birth _____ Are you a U.S. Citizen? _____
(if not currently living at legal address)

Temporary Address _____

Name of School (HS, Prep, College) _____

Address _____ Guidance Phone No. _____

Anticipated Graduation Date or Year You Graduated _____ GPA _____

If Already Graduated High School, What School? _____

Please list your best scores to date:

SAT Section Scores: Reading & Writing _____ Math _____ Essay (if applicable) _____

Subject Tests: Subject/Score _____ Subject/Score _____

(if applicable)

Subject/Score _____ Subject/Score _____

ACT: Composite___ Math___ Science___ STEM___ English___ Reading___ Writing___ ELA___

Have you applied to our NJ Senators for a nomination? No Yes (if yes, who?) _____

Have you ever applied to Rep. Smith for a nomination before? If so, when? _____

Do you intend to
take the SAT/
ACT again?
Yes No

If yes, when?

**Please list extracurricular school, community and athletic activities
or you may include a typed list of activities/resume as a separate attachment.**

School Activities: _____

Community Activities: _____

Athletic Activities: _____

If I receive (or my child receives) an appointment to a Service Academy, Congressman Smith has permission to use my (or my child's) name and photograph in media releases, printed publications, and/or websites.

Applicant Signature _____ Date _____

Parent/Guardian Signature _____ Date _____
(Granting permission to make application if candidate is under the age of 18)

This application, along with all required supplemental documents, must be returned no later than

4:30 pm on Friday, October 9, 2020 to:

Rep. Chris Smith

112 Village Center Dr., Freehold, NJ 07728

For information please call 732-780-3035