



**The Office of Congressman Byron Donalds**  
**Florida's Congressional District**  
**Application for Nomination to U.S. Service**  
**Academies**

Please complete this application and submit all supporting documents no later than October 9th, 2026, at 11:59pm. Applications will be accepted via electronic submission to the Congressman  
Academy Nominations official email, DonaldsAcademyNominations@mail.house.gov .  
If you have any questions, please email Steph Neurock at DonaldsAcademyNominations@mail.house.gov.

***I. Applicant Information:***

Personal Information Name (Last, First Middle) : \_\_\_\_\_

Preferred name (if different from above):  
\_\_\_\_\_

Date of birth (MM/DD/YYYY): \_\_\_\_\_

\_\_\_\_\_ Social Security Number:  
\_\_\_\_\_

Permanent Address:

\_\_\_\_\_ City:  
\_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Temporary Address (if applicable): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Are you a US Citizen? Yes / No If not, list your country of citizenship: Yes No  
\_\_\_\_\_

Are your parents legal residents of the 19th Congressional District of Florida? Yes No

Parents/Guardian Name: \_\_\_\_\_

Parent/Guardian Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Parent/Guardian Phone: \_\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

*II. Academy Preference:*

Please rank the Academies to which you are seeking a nomination in order of preference (1-4): (If you do not mark an Academy or do not open a file with that Academy, you will not be considered for that academy)

U.S. Air Force Academy \_\_\_\_ U.S. Merchant Marine Academy \_\_\_\_

U.S. Military Academy \_\_\_\_ U.S. Naval Academy \_\_\_\_

Have you applied for a Service Academy nomination to any source, congressional or otherwise, for a class entering prior to this year? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, what was the result? \_\_\_\_\_

Please indicate all other Service Academy nomination sources to which you are applying:

President \_\_\_\_\_ Vice President \_\_\_\_\_ JROTC \_\_\_\_\_ Senator Scott \_\_\_\_\_ Senator Moody \_\_\_\_\_

If you are now in the military, please list your branch of service: \_\_\_\_\_

Rank: \_\_\_\_\_ Length of Service: \_\_\_\_\_

*III. High School Information:*

High School Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Year you will graduate: \_\_\_\_\_

Class rank/Class size (ex. 3/250): \_\_\_\_\_ Unweighted GPA (ex. 3.5/4.0) \_\_\_\_\_

IV. Post-Secondary Information: \_\_\_\_\_

Post-Secondary Institution Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Year you will graduate: \_\_\_\_\_

Class rank/Class size (ex. 3/250) : \_\_\_\_\_ Grade Point Average (ex. 3.5/4.0) \_\_\_\_\_

SAT/ACT Scores

Please request a score report of all scores wanting to be included and reviewed through the College Board and ACT.

SAT Test Code: 5424

ACT Test Code: 7339

*IV. Extracurricular Activities:*

List any significant offices you have held since entering ninth grade:

In what non-athletic, extracurricular activities or work experiences have you participated since entering ninth grade?

List any non-athletic awards, achievements, prizes or accomplishments not listed above:

List any sports that you participated in during high school, and indicate varsity letters received if any:

List any athletic awards or special recognition you have received:

**In addition to the above application you will need to submit a one page, single spaced, essay on why you would like to attend a service academy and what makes you a competitive candidate. Your full name must be included in the header.**

Please Read Carefully Before Signing: It is my sincere desire to attend a U.S. Service Academy, and I intend to pursue a vigorous academic course of study if appointed. I understand that attending a service academy also requires a minimum of five years of military service following graduation, and I fully commit to this responsibility. I am a U.S. Citizen, or will be by July 1 of the year I will attend the Academy. I will be at least 17 years, but not yet 23 years of age, on July 1 of the year I attend the Academy. I am not married. I am not pregnant, nor do I have any child support obligations. I am a legal resident of the 19th Congressional District of Florida. I certify that the information I have provided in the application packet is accurate. Any changes to this information will be reported immediately. Additionally, I understand that I will not be considered for a nomination if the required documents are incomplete or are not submitted by October 9th 2026.

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Signature

Date

In signing this form, you are stating that you understand the nomination requirements for Congressman Byron Donalds and that you will abide by these requirements