APPLICATION FOR CONGRESSIONAL PAGE APPOINTMENT

Please type or print all information. Send completed application with *all* components to your sponsoring Member of Congress, who will, in turn, send his Letter of Recommendation along with the Member Certification form to the Office of the Republican Leader, John Boehner. Omission of any part will delay your processing and notification.

Honorable _____
Congressional Sponsor

OFFICE USE ONLY

_____ to_____
Appointment Period

PERSONAL DATA **Do Not Leave Any Blank Spaces** (please print clearly)

Legal Name:_____ Sex:_____
Last First Middle Initial

Parent/Guardian name: _____
(Father) Last First Middle Initial

Home Ph:_____
Work Ph:_____
Cell Ph:_____
E-Mail:_____

Parent/Guardian name:_____
(Mother) Last First Middle Initial

Home Ph:_____
Work Ph:_____
Cell Ph:_____
E-Mail:_____

Permanent Home Address:_____
Number and Street

City: _____ State:_____ Zip:_____

Birthdate: _______________ Age:_____

Social Security No. ___ ___ ___ - ___ ___ - ___ ___ ___ ___

Grade Point Average (unweighted): _____

Maximum period of availability: From:_____ To:_____

Present grade in school: freshman _____ sophomore _____ junior _____ senior _____

Are you related to a current Member of Congress: _____ yes _____ no.

If so, please list Member and relationship: _____

EXTRACURRICULAR AND PERSONAL ACTIVITIES

Please list your principal extracurricular, community and family activities in the order of their interest to you. Include specific events and/or major accomplishments, such as musical intrument played, varsity letters earned, etc.

Activity	Grade Level or Year of Participation			Approximate Number of Hours Spent Per Week	Positions Held or Honors Received
	9	10	11		

Work Experience	Nature of Work	Approximate Number of Hours Spent Per Week	Dates of Employment

AUTOBIOGRAPHICAL STATEMENT

This section offers an opportunity for you to help us become acquainted with you and why you would like to be a Congressional Page. It allows you to demonstrate your ability to organize your thoughts and express yourself. With this in mind, please type or print legibly a 250-300 word autobiography.

DECLARATION OF PARENTAL CONSENT

I _____ am the parent/legal guardian of _____ and give my consent for him/her to apply for an appointment to serve as a Page in the U.S. House of Representatives, from **January 27, 2007 – June 6, 2008**.

I agree to provide, supervise and pay for his/her travel to and from the U.S. Capitol Building. We accept full responsibility for his/her supervision at his/her place of residence in the District of Columbia, and for his/her physical safety and well-being while he/she is employed as a Page in the U.S. House of Representatives.

_____
Parent or Guardian Signature

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR APPLICATION

SCHOOL REPORT

APPLICANT (After filling out the identifying information below, give this form in addition to the coursework form to your **school advisor/principal/or counselor to complete**)

NAME Last First Middle Jr. (etc.)

ADDRESS Street City State Zip Code

TELEPHONE (Home and Cell) (include area code)

DATE OF BIRTH Current Grade Year of Graduation

ADVISOR'S/PRINCIPAL'S/COUNSELOR'S REPORT

NAME OF PERSON PREPARING REPORT **POSITION**

SCHOOL NAME

SCHOOL ADDRESS

SCHOOL TELEPHONE **SCHOOL FAX**

SCHOOL CEEB/ACT/SAT CODE

Please complete the following regarding the applicant:

- Of this applicant's graduating class, _____% plan to attend a four-year college. This applicant ranks _____ in a class of _____ students. **His/her GPA is _____ on a 4.0 scale.**
- Attach an official 9th and 10th grade transcript. The applicant's Grade Point Average (GPA) cannot be determined without a complete record. Include a key to the transcript to aid computation. If available, attach a school profile.
- Please list coursework taken freshman and sophomore years. Data and letter grades must be transferred from student's transcript.

COURSEWORK

FRESHMAN YEAR	SUBJECT	SEMESTER 1 GRADES	SEMESTER 2 GRADES
English			
Mathematics			
Science			
Social Studies			
Foreign Language			
SOPHOMORE YEAR	**SUBJECT**	**SEMESTER 1 GRADES**	**SEMESTER 2 GRADES**
English			
Mathematics			
Science			
Social Studies			
Foreign Language			

If Applicable, please list the coursework for this applicant's Junior year at his or her "home" high school:

JUNIOR YEAR	SEMESTER 1	SEMESTER 2
English		
Mathematics		
Science		
Social Studies		
Foreign Language		
Other		

- **To be scholastically eligible for the school-year Page Program, a student must be at least 16 years of age by the first day the appointment begins, must be a Junior, AND, must have a cumulative 3.0 or 80% GPA in the five major subjects. Please indicate if the applicant meets these requirements.**
  _____YES _____ NO

- **The Page School enrollment never exceeds sixty-six students and therefore has a limited curriculum that may not parallel the student's home school curriculum. Please indicate that the applicant and home school are aware of these limitations. _____ YES**

- **EVALUATION: It is essential to the applicant's eligibility that you record what you think best describes his or her academic and personal characteristics. We are particularly interested in the applicant's intellectual ability, personal integrity, adaptability, cooperativeness, relative maturity, and physical stamina. We welcome information that will help differentiate this applicant from others.**

_____

SIGNATURE **DATE**

Thank you for your cooperation. Please seal, and return completed form (with transcript) to applicant for inclusion with application.

APPLICANT CHECKLIST

____ Completed Application

____ Extracurricular Activities/Work Experience

____ 250-300 Word Essay (attached to application form)

____ Declaration of Parental Consent Form (signed)

____ School Report/Coursework (signed) and Official School Transcript

____ Three Letters of Recommendation (one letter from current teacher)

My signature below indicates that all the information contained in my application is complete, factually correct, and honestly presented.

Signed,

_____
Applicant Signature

_____
Parental Signature

_____
Date

SUBMIT ALL COMPONENTS AT ONE TIME. DO NOT SEND PARTS INDIVIDUALLY