



NYACK HIGH SCHOOL NATIONAL HONOR SOCIETY

Ms. Gillan -- Advisor



National Honor Society Application Checklist

All applications must include:

- Personal data page
- Signature page
- Leadership personal statement
- Community service form
- School Activity form
- Two teacher recommendation forms – **complete the top portions only and deliver to your recommending teacher.**

Applications must be received by Wednesday, September 26th 2018

All applications can be placed in the NHS Application Box in the Guidance Office

**Nyack High School
National Honor Society Application
Personal Data Form**

Name: _____
Last First Middle

Address: _____
Number and Street

City and State Zip Code

Home Telephone: _____ Cellular Telephone: _____

E-mail: _____

General Directions: Use the checklist to be sure all parts of the application are included. Follow the specific directions on each page.

Incomplete applications will not be reviewed.

Return your completed application to the NHS Application Box in the Guidance Office by Wednesday, September 26th, 2018.

Teacher Recommendations: In the spaces below, **name the two teachers** you will ask to recommend you. Complete the table. A recommendation **must** be given to a teacher whose class you have taken or are currently taking. You **cannot** use a coach, activity sponsor, counselor or non-teaching staff person.

Teacher	Course	Semester /Year

Questions: If you have questions or need help completing the application, you may contact the following advisor:

Kelly Gillan Kgillan@nyackschools.org

**Nyack High School
National Honor Society Application
Signature Page**

To be completed by the applicant:

I understand that completing and submitting this application does not guarantee selection to the National Honor Society. I attest that the information presented here is complete and accurate. If selected, I agree to abide by the standards and guidelines of the chapter and to fulfill all of my membership obligations to the best of my ability.

Name: _____
(Printed)

Signature: _____
(Date)

To be completed by the parent or guardian of the applicant:

I have reviewed the application and give permission for my child to apply to the Nyack High School chapter of the National Honor Society.

Name: _____
(Printed)

Signature: _____
(Date)

Daytime Telephone: _____ E-mail: _____

**Nyack High School
National Honor Society Application
Leadership Personal Statement**

Directions: Please answer the following question.

How do you see yourself as a leader? Describe an activity or experience in which your participation made a difference. How did your leadership skills influence the outcome of a certain situation? Give examples.

(Maximum of 250 words - this page may be typed and attached)

Student Name: _____

**Nyack High School
National Honor Society Application
Community Service Form**

Directions: Complete this page for your **one or two** most meaningful unpaid community service experiences. These should be events OUTSIDE of Nyack High School activities.

Ask each sponsor to describe your service, confirm your length of service, comment and sign a letter on the organizations letterhead. Include the letter(s) with your application.

Student Name: _____

1.
Organization: _____

Address: _____

Telephone: _____ E-mail: _____

Dates of Service: _____ Total Hours of Service: _____

Sponsor Name: _____

Sponsor Title: _____ Sponsor E-mail: _____

2.
Organization: _____

Address: _____

Telephone: _____ E-mail: _____

Dates of Service: _____ Total Hours of Service: _____

Sponsor Name: _____

Sponsor Title: _____ Sponsor E-mail: _____

**Nyack High School
National Honor Society Application
School Activity Form**

Directions: List all activities in which you have participated during high school. Include clubs, teams, musical groups, etc. Please include any major accomplishments for an activity (ex. Captain, director, etc.). Also note the name of the faculty coordinator you work with in this activity.

ACTIVITY	YEAR (9 th , 10 th , 11 th)	Accomplishment	Faculty Advisor

Student Name: _____

**Nyack High School
National Honor Society Application
Teacher Recommendation Form**

Applicant: Complete the top portion only.

Student Name: _____

Teacher Name: _____

.....
This student is seeking to become a member of the National Honor Society. The Faculty Council would like your input to help make its decision.

What course did you teach this student and when? _____

Check the appropriate box that best describes the character of the student.

Attribute	Truly Outstanding (top 2-3%)	Excellent (Top 10%, but not top 2-3%)	Good	Average	Below Average	No Basis for Judgment
Responsibility						
Maturity and self-discipline						
Self-confidence						
Sense of humor						
Concern for others						
Integrity						
Reaction to setbacks						
Compliance with school regulations						
Cooperation with others						

Recommendation: _____ recommend without reservation
 _____ recommend with reservation (Please comment).
 _____ do not recommend (Please comment).

Comments: _____

Signature _____

Printed Name _____

Date _____

**DO NOT RETURN TO THE APPLICANT.
Please sign and return to the mailbox of Kelly Gillan by Wednesday, September 26, 2018.
Thank you.**

**Nyack High School
National Honor Society Application
Teacher Recommendation Form**

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Teacher Name: _____

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