

BRIARCLIFF HIGH SCHOOL – THE NATIONAL HONOR SOCIETY

The information that you provide on this form will be used by the Faculty council to assist in the selection process.

DIRECTIONS

1. Please type or neatly print the information requested in this packet. Be sure to get the required phone numbers and signatures for any references you list.
2. Return this packet in the file folder it was included in. Include your signature on the outside. Please enclose a check made out to Briarcliff High School for \$20 and attach with a paper clip to the application. This will cover the cost of the NHS stoles worn at graduation and will only be deposited if the applicant is accepted.
3. Submit this complete form in its envelope to Mr. Courtney on Friday, September 27th at 2:20 in Room H201.
4. In addition to this packet, attach a minimum of a 150 word typed statement on why you wish to become a National Honor Society member. Feel free to include any special information about yourself that was not listed in the categories provided which enhances your candidacy.

FINAL DEADLINE FOR PACKET IS: FRIDAY, SEPTEMBER 27

FULL NAME: _____

HOMEROOM TEACHER: _____ HOMEROOM NUMBER: _____

PHONE NUMBER: _____

FULL NAME AND ADDRESS OF PARENT/GUARDIANS:

NOTIFICATION OF SELECTION OR NON SELECTION WILL BE MADE IN WRITING IN ACCORDANCE WITH THE DECISION OF THE FACULTY COMMITTEE. COMPLETION OF THIS FORM DOES NOT GUARANTEE SELECTION. INFORMATION ON THE INDUCTION CEREMONY WILL BE GIVEN WITH THE SELECTION NOTIFICATION.

CO-CURRICULAR ACTIVITIES:

LIST ALL ACTIVITIES IN WHICH YOU HAVE PARTICIPATED DURING HIGH SCHOOL, SUCH AS CLUBS, TEAMS, MUSIC PROGRAMS, DRAMA, ETC...

[illegible]**COMMUNITY ACTIVITIES:**

LIST ANY COMMUNITY/VOLUNTEER ACTIVITIES IN WHICH YOU HAVE PARTICIPATED AND NOTE ANY SPECIAL ACCOMPLISHMENTS. THESE ACTIVITIES CAN BE OUTSIDE OF SCHOOL IN WHICH YOU PARTICIPATED FOR THE BETTERMENT OF YOUR COMMUNITY. **BE SURE TO INCLUDE THE NAME AND PHONE NUMBER OF AN ADULT SPONSOR.**

[illegible]

WORK EXPERIENCES:

LIST BELOW ANY JOB EXPERIENCES (PAID OR UNPAID) YOU HAVE HAD:

TYPE OF JOB	EMPLOYER	DATES EMPLOYED	VOLUNTEER OR PAID?	NUMBER OF HOURS/WEEK

LEADERSHIP POSITIONS:

LIST ALL ELECTED OR APPOINTED LEADERSHIP POSITIONS HELD IN SCHOOL, COMMUNITY OR WORK ACTIVITY. ONLY THESE POSITIONS IN WHICH YOU WERE DIRECTLY RESPONSIBLE FOR DIRECTING OR MOTIVATING OTHERS SHOULD BE INCLUDED.

LEADERSHIP POSITION	9 TH	10 TH	11 TH	12 TH	ACTIVITY OR ORANIZATION

RECOGNITION AND AWARDS:

RECOGNITION/AWARD	9 TH	10 TH	11 TH	12 TH	DESCRIPTION

