**Directions:** Please complete all sections, filling in your answers on this form. All information will be used by the Faculty Committee to assist with the selection process. All forms must be typed. *Completion of this form does not guarantee selection.*

|  |
| --- |
| **Candidate Information** |
| Name: |  |
| Address: |  |
| Phone Number: |  |
| E-mail Address: |  |

**I. Co-Curricular Activities:** List all activities in which you have participated during high school. Include clubs, teams, groups, etc., and any significant accomplishments. *Activities for High School credit do not count*.

|  |  |  |
| --- | --- | --- |
| **Activity** | **Years*****(9, 10, 11, 12)*** | **Accomplishment** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |
| 5. |  |  |
| 6. |  |  |
| 7. |  |  |
| 8. |  |  |
| 9. |  |  |
| 10. |  |  |

**II. Community Service.** List community service in which you voluntarily participated in during high school, and describe your duties. For example: church groups, 4-H, scouts, volunteering, etc. Include the name of the adult leader or sponsor or organization.

|  |  |  |  |
| --- | --- | --- | --- |
| **Activity** | **Leader & Phone #** | **Length** | **Description** |
| 1.  |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |

**III. Leadership Positions.**

**Part A:** List all elected or appointed leadership positions held in high school, community or work activities. For example: class president, committee chairperson, team captain, yearbook editor, etc.

|  |  |  |
| --- | --- | --- |
| **LEADERSHIP POSITION** | **ORGANIZATION** | **DUTIES** |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |

#

**Part B:** List the leadership characteristics you demonstrated in your daily activities.

|  |  |
| --- | --- |
| Leadership Characteristics  | How Demonstrated |
| *Example: Moral ethics* | *I don’t cheat on school work* |
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |
| 5. |  |
| 6. |  |
| 7. |  |
| 8. |  |
| 9. |  |
| 10. |  |

**IV. Recognition and Awards.** List any honors or special recognition you have received during your years in high school. These do not have to be school-related.

|  |
| --- |
| Recognition or Award |
| 1. |
| 2. |
| 3. |
| 4. |
| 5. |

**V. Work Experience.** List any work experience you have participated in demonstrating character, leadership or service.

|  |  |
| --- | --- |
| Work Experience | Supervisor & Phone Number |
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |
| 5. |  |

#

# VI. Membership Statement

Write a complete paragraph to answer each of the following questions.

1. What have you done during high school exemplifying your qualities of scholarship, leadership, service, and character, to merit membership in the National Honor Society?
2. What are your academic/career goals and how have your character, leadership, and service strengths prepared you for success in these goals?

**Candidate and Parent Signatures**

*The following signatures are required to be turned in with your Candidate Form.*

I have read and understand the “NHS Selection Policy” and fully understand the selection policy.

I also understand that:

* Completing the Candidate Form does not guarantee selection to the National Honor society.
* Selection into the Westfield Area High School Chapter of the National Honor Society is a privilege, not a right.
* NHS is not an organization that simply recognizes good kids with good grades.
* The application process and selection criteria are rigorous
* Many students that apply for induction will not be chosen.
* I should not approach the application process “expecting” to be selected.
* NHS guidelines prohibit any type of quota system for selection.
* There is no set number or percentage of students who will be selected each year.

 I attest that the information presented in the Candidate Form 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.

Candidate Name (printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Candidate Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have read and understand the “NHS Selection Policy” and fully understand the selection policy.

I also understand that:

* Completing the Candidate Form does not guarantee that my child will be selected for induction into NHS.
* Decisions regarding the selection and non-selection of candidates belong to the NHS Faculty Committee.
* The Faculty Committee’s decision is final and is not subject to appeal.
* Chapters are neither legally nor constitutionally obligated to share reasons for the non-selection of students.
* It is the practice of the Pioneer Chapter that the members of the Faculty Committee remain anonymous.
* All information used during the selection process remains confidential.
* The Advisor, at his or her discretion, may give general information to the student concerning non-selection.
	+ Such information may be given to the student if he or she sets up a private meeting with the Advisor.
* The NHS Advisor will not field questions from parents about why their child was not selected.
* Any meeting between the student and Advisor concerning non-selection does not include parents.

I have reviewed the information included on my child’s Candidate Form and I attest that the information presented in the Candidate Form is complete and accurate. If selected, I understand that my child must abide by the standards and guidelines of the chapter and must fulfill all of his or her membership obligations to the best of his or her ability.

Parent Name (printed) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_