National Honor Society Jefferson/Silva High School

2021-2022



<u>Directions:</u> Please complete all sections. This survey form must be returned to Mr. Munoz, via e-mail to: <a href="mailto:mailt

I. Administrative Information

NAME:				Classification:	
SCHOOL:					
SCHOOL ENROLLME	NT DATE:				
understan	idable. Tł	nerefore, if a candidat	e lacks the required	adapt to, the lack of se service or community you bring to National I	hours, they may
Insert Picture Here)				

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II. Extra Curricular (SCHOOL HOURS): List all activities in which you have participated during LAST semester. Include school clubs, band, orchestra, choir, ROTC, athletic teams, and academic teams, etc. (no individual teachers), and the major accomplishments or contributions in each. (Don't list leadership positions in this section; those will be placed in section III.)

Name of Club or Organization		assit			Total hours rendered (during the current semester; don't include meetings or	Description of Services rendered	Sponsor/Coach printed/ name and phone number	SPONSOR/COACH SIGNATURE: Sign ONLY if hours were accrued between (12/20-3/21)
	9	10	11	12	proofices)			
1								
2								
3								
4								
5								
6								
7								

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III. Leadership Positions List all elected or appointed leadership positions held in school, the community, or work activities. Only those positions in which you were directly responsible for directing/motivating others should be included. For example, elected student body, class, or club officer; committee chairperson; team captain; newspaper/yearbook editor; work area manager; or community leader, etc. Please list them in reverse chronological order.

In reverse chronological order.										
Name of Club or Organization	C	lassi			Position Held					
	9	10	11	. 12						
1										
2										
3										
4										
5										
6										

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IV. Community Service Hours: Please list all community service performed out of school Last semester. Service activities are those which are done for or on behalf of others (not including immediate family members or individuals or for-profit organizations) for which no compensation (monetary or other) has been given (think non-profit organization). These activities are activities in which you participated for the betterment of your community. For example: church youth groups, Boy/Girl Scouts, volunteer services for the elderly, poor, or disadvantaged, etc. Please list the name and phone number of an adult supervisor who can verify your participation in each activity and include signatures.

Name of Non-Profit Organization	Classification 9 10 11 12			Total Hours (for the CURRENT semester)	Description of Services Rendered	Supervisor printed name and phone number	Supervisor Signature: Sign only if hours were accrued since December 2020.
1							
2							
3							
4							
5							
6							

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V. Work Experience, Recognition, and Awards: List below any job experience, honors, or recognition that you have received that support your bid to be selected for membership in the National Honor society. Work experience may be paid or volunteer.

Job, Award or Recognition	Classification 9 10 11 12			ion	Work Activity and # of Hours Spent				
				12					
1									
2									
3									
4									
5									
6									

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VI. Other Requirements:

Initial here		Provide signatures and contact	ct info for each sponsor/supervisor for both school and community service hours.	
Initial here		English		
		Science	Social Studies (Name of elective class)	
Initial here Initial here		I understand that completing	oort for this semester would you bring to National Honor Society" this form does not guarantee selection to information I have provided is correct, current, and honest.	
Student Signa	ture		Date:	
		I have read the information	on provided on this form and verify that is accurate.	
Parent/Guard	dian S	Signature	Date:	
Home Addres	ss and	I Zip Code		
Parent's	Cell:		Candidate's Cel	