
NHS Candidate Information Form

LODI HIGH SCHOOL CHAPTER OF THE NATIONAL HONOR SOCIETY

Directions: Please print in ink and complete all sections. Submit this form to Mrs. Jelinek in Room 1112 no later than **Friday, September 28**. All information will be used by the faculty council to assist with the fair consideration of your candidacy during the selection process. Completion of this form does not guarantee selection. If you have questions about this form, please contact Mrs. Jelinek.

Student Information

Name (exactly as you would like it to appear on your certificate):

Grade:

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Home address:

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Email address:

Phone number:

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Parent/guardian name(s) and address(es):

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Leadership Positions

List all elected or appointed leadership positions you have held in school and community activities. Only those positions in which you were responsible for directing or motivating others should be included. Please include the name, email address, and signature of the adult responsible for supervising your leadership in each position.

Activity and Accomplishments	Grade				Adult Sponsor
	9	10	11	12	

Service Activities

List individual or group service projects done either in or out of school. Generally speaking, service activities are those that are done for or on behalf of others (not including immediate family members) for which no payment has been given. Please include the name, signature, and email of the adult responsible for supervising your service. Also, include the estimated number of hours you invested.

Activity and Estimated Hours	Grade				Adult Sponsor
	9	10	11	12	

Other Student Activities

List all other school-based activities (*not* noted above) in which you have participated in school. Include clubs, teams, musical groups, etc., and any significant accomplishments in each.

Activity	Grade				Adult Sponsor
	9	10	11	12	

Recognition and Awards

Though not a specific criterion for membership, please list below any additional honors or recognition you have received in high school.

Description	Grade				Adult Sponsor
	9	10	11	12	

Signatures

I understand that completing this form does not guarantee selection to the 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.

Student Signature:

Date:

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I have read the information provided by my son/daughter on this form and can verify that it is true, accurate, and complete.

Parent/Guardian Signature:

Date:

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Return completed form to Mrs. Jelinek in Room 1112 before the deadline.
Late forms will not be considered.