

Student Name _____ SRT B # _____ SRT W# _____

Application for Membership
Jennings County High School National Honor Society
2022-2023

Return to Mrs. Ertel in room 215 by Spring Break (on paper)

Member Qualifications 2022-2023

Character: The NHS member has had an outstanding record of conduct and behavior at school and in the community and will maintain this outstanding record until graduation of high school.

Scholarship: Minimum 9.4 GPA maintained until graduation of high school.

Leadership: A member must name any leadership roles at school or in the community achieved since the ninth grade with the roles and the name of the adult who supervised each of these activities.

Service: A member can demonstrate the completion of at least ten (10) hours of service undertaken at school or in the community since the start of ninth grade and will perform 20 hours of community service from 9-12 grade **(10 of which are to be dedicated solely to NHS)**.

**add boxes below as needed*

Leadership Roles:

List all elected or appointed leadership positions or other positions of responsibility held in school, community or at work. Only those positions in which you were responsible for directing or motivating others should be included.

Leadership Role	Grade Level	Activity/Organization	Supervising Adult

Service Activities:

List service activities in which you have participated. These can be individual or group projects either in or out of school.

Activity	Grade Level	Hours of Service	Supervising Adult

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 Level	Accomplishments

Other Community Activities:

List other activities in which you have participated and note any major accomplishment in each.

Year	Community Activity	Hour	Accomplishment	Supervising Adult
------	--------------------	------	----------------	-------------------

		S	S	
9				
10				
11				
12				

Work Experience, Recognition, and Awards:

Although not a criterion for membership, please list below any job experiences, honors, or recognition you have received that support your candidacy for membership in the Honor Society. Work experience can be paid or volunteer

Year	Job, Recognition, or Award	Group or Activity	Hours Spent on Job or Activity (if applicable)	Supervising Adult
9				
10				
11				
12				

I understand that completing and submitting 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

I/we have reviewed the information packet provided by the chapter. In addition, I/we have read the information submitted by my son/daughter on this form and can verify that it is true, accurate, and complete.

Parent signature _____ Date _____

Preferred method of contact:

Parent phone number: _____

Parent email: _____

Student phone number: _____

Membership Dues: \$35 per member.

I request a scholarship to cover all or part of the fees required for membership in NHS
circle **Yes/No**
