For Faculty Council Leadership \_\_\_\_\_\_ Hours \_\_\_\_\_\_\_\_\_\_\_

Y \_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

N \_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

# MONARCH HIGH SCHOOL

**329 CAMPUS DRIVE**

**LOUISVILLE, CO 80027**

**NATIONAL HONOR SOCIETY OF SECONDARY SCHOOLS**

**MONARCH HIGH SCHOOL CHAPTER**

**Please complete all sections. Please type or print. Do not be modest. Every bit of information can be used by the Faculty Council to assist with the selection process. Please limit all information of your experiences to your high school career. Completion of this form does not guarantee selection. If you need more space attach another sheet.**

### Administrative Information (please print)

**Formal Name: Grade:**

**E-mail (frequently checked) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**II. Co-curricular Activities: List all activities in which you have participated during high school. Include clubs teams, musical groups, etc., and major accomplishments in each.**

|  |
| --- |
| **Activity Year Accomplishments** |
|  | **9** | **10** | **11** | **12** |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**III. Leadership Positions: List all elected or appointed leadership positions held in school, community, or work activities. Only those positions in which you were directly responsible for directing or motivating others should be included, for example, elected student body, class, or club officer; committee chairperson; team captain; newspaper editor; work manager; or community leader. Please attach *one letter of reference for each activity from a supervisor or sponsor for the activity. This is a requirement.***

**This is a requirement.**

|  |
| --- |
| **Activity Year Leadership Position Held** |
|  | **9** | **10** | **11** | **12** |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

 List the three teachers you are asking to write recommendations for you:

 1. 2. 3.

**IV. Service Activities: List volunteer community service activities (i.e.outside of school activities) in which you have participated. These can be community service projects done with a group from the community, or done as an individual projects performing community service. Generally speaking, service activities are those which are done for or on behalf of others in the community (not including family members) for which no compensation (monetary or other) has been given. The minimum volunteer community service is *twenty-five hours* during your time in high school. *Please attach a letter from the adult supervisor verifying your hours of participation in the activity*. This is a requirement.**

|  |
| --- |
| **Activity Year Supervisor and Phone Number** |
|  | **9** | **10** | **11** | **12** |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**V. Work Experience, Recognition, and Awards: List below any job experiences, honors, or recognition that you have received that supports your bid to be selected for membership in the NHS.**

|  |
| --- |
| **Job, Recognition, Award Year Group or Activity/Number of Hours Spent** |
|  | **9** | **10** | **11** | **12** |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**I understand that completing this form does not guarantee selection to NHS, that no credit will be given for service hours that are not verified by a letter from adult supervisor of the volunteer project, that my high school conduct record will be checked (including flaws in character such as cheating), that late or partial applications will not be considered, and that the information presented here is accurate**

 **Date:**

#### Student Signature

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

 **Date:**

#### Parent Signature

**Applications without signatures will not be considered.**

**The following is a checklist for you to use to ensure you are turning in a complete application for consideration. Incomplete applications will not be considered.**

**1.\_\_\_\_\_\_This form is complete and has been signed by myself and one parent.**

**2.\_\_\_\_\_\_I have asked three teachers to fill out recommendation forms, that I have given them. I have asked them in a timely manner such that they can get the form turned in on time.**

**3.\_\_\_\_\_\_I have enclosed my verification letters for leadership positions I have held and community service hours I have volunteered for. Your letters should indicate the specific number of hours participating in community service. Vague references like “3 days” or “two weeks” will not be considered.**