

Student	Namo:		
Student	ivaiiie.		

HUBBARD NATIONAL HONOR SOCIETY APPLICATION PACKET FALL SENIOR APPLICATION

Congratulations! Based on grade point only, you are eligible for further consideration for membership in the Hubbard High School National Honor Society. Election to membership in the National Honors Society represents the highest honor and trust that can be bestowed upon a student in the junior or senior year of high school. The Hubbard High School National Honor Society recognizes students for outstanding SCHOLARSHIP, LEADERSHIP, SERVICE, and CHARACTER. Membership in the society is indicative that the student has attained and is demonstrating and promoting all of these qualities, and is exerting an effort to improve conditions in the school and community. Meeting the grade point average requirement of 3.4 or above is not the sole criteria for acceptance into the National Honor Society. Evidence that you meet the qualifications of SCHOLARSHIP, LEADERSHIP, SERVICE, and CHARACTER is also necessary to be eligible for membership.

REQUIREMENTS:

- 1. Complete all forms in this packet and attach the typed intentional paragraphs. Be sure to include the signatures of parent/guardian(s) or advisors where requested.
- 2. All activities, accomplishments, etc. included in the application must have taken place during high school. Do not include anything that occurred before you were in high school. Doing so could jeopardize your chances for admission.
- 3. Three evaluation forms must be submitted. Two of these evaluations MUST be from **current** teachers.
- 4. Return this application, in person, to Mrs McCarty in room 109 by 2:30 pm on Wednesday, September 18, 20234

Ask questions concerning the application/selection process prior to the deadline. Failure to follow the above procedures will nullify your application for membership.

VERIFICATION: Read the following carefully before signing.

- 1. I swear that the information in this application is true and accurate to the best of my knowledge.
- 2. I understand that membership in the National Honor Society is an honor, not a right, conferred upon students by the collective faculty of Hubbard High School.
- 3. I understand that an anonymous Faculty Council consisting of five members of the Hubbard High School faculty representing various disciplines, supervised by the NHS Adviser will review my application.
- 4. I understand that upon submission of this packet, my disciplinary record will be reviewed and taken into consideration during the selection process.
- 5. I understand that the entire teaching faculty, administrators and guidance will have the opportunity to offer any relevant information to the selection committee.
- 6. I pledge that, if I am selected, I will participate in meetings, individual and/or group service projects selected by the organization and approved by the NHS advisor.
- 7. I also understand that I will continue to uphold the standards of leadership and character and that any violation of the Student Code of Conduct or a disciplinary referral can result in probation or dismissal from the chapter.
- 8. I wish to be considered for membership in the Hubbard Chapter of the National Honors Society. I realize that my selection is not guaranteed, and I accept the decision of the Hubbard NHS Faculty Council as final.

Student signature date

PARENT REVIEW AND CONSENT:

I have reviewed my son/daughter's application and affirm that it is correct. I give my consent for my son/daughter to apply for membership in the Hubbard Chapter of the National Honors Society. I also understand that the decision of the Faculty Council is final.

Parent signature date

NHS CANDIDATE ACTIVITIES CHECKLIST

SCHOOL ACTIVITIES - 1 POINT EACH

FR	so	JR	SR		ADVISOR/COACH INITIALS
				FALL MUSICAL CAST OR CREW	
				SPRING MUSICAL CAST OR CREW	
				CHOIR	
				FLAG LINE	
				MAJORETTE	
				MARCHING BAND	
				DANCE LINE	
				SPEECH AND DEBATE	
				STUDENT COUNCIL	
				ROTARY	
				PEP CLUB	
				MOCK TRIAL	
				LINK CREW	

SCHOOL ACTIVITIES - 1/2 POINT EACH

FR	so	JR	SR		ADVISOR/COACH INITIALS
				ENGLISH FESTIVAL	
				FEA/FTA	
				нив	
				TEAM STATISTICIAN	
				BRIDGE BUILDING	
				JAZZ BAND	
				PEP BAND	
				HONORS BAND/CHOIR	
				SOLO AND ENSEMBLE	

SCHOOL ACTIVITIES - 1/4 POINT EACH

FR	so	JR	SR	ACTIVITY	ADVISOR/COACH INITIALS
				ACADEMIC TEAM	
				ART CLUB/ NAHS	
				BARD	
				BOYS/GIRLS STATE	
				CLASS OFFICER	
				ECOLOGY CLUB	
				FBLA	
				LANGUAGE CLUB	
				SADD	
				SCHOOL TUTOR	
				VIDEO PRODUCTIONS	
				BUSINESS CLUB	

SPORTS - 1 POINT EACH

FR	so	JR	SR		ADVISOR/COACH INITIALS
				BASEBALL/SOFTBALL	
				BASKETBALL	
				BOWLING	
				CHEERLEADING	
				CROSS COUNTRY	
				FOOTBALL	
				GOLF	
				SOCCER	
				SWIMMING	
				TRACK AND FIELD	
				VOLLEYBALL	
				WRESTLING	
				CLUB SPORTS	

COMPETITIONS - 1/2 POINT EACH

FR	so	JR	SR	
				ART COMPETITIONS
				LANGUAGE COMPETITIONS
				LITERACY COMPETITIONS
				MATH COMPETITIONS
				ROTARY COMPETITIONS
				SCIENCE COMPETITIONS
				HISTORY DAY COMPETITIONS
				STAMBAUGH YOUTH CONCERT BAND
				Y-TOWN SYMPHONY YOUTH ORCHESTRA
				STEAM FEST
				SENIOR SOLO (SYCB & YSYO)
				ALL STATE BAND/CHOIR

ADDITIONAL ACTIVITIES (NON-SCHOOL AFFILIATED) 1 PT EACH

FR	so	JR	SR	
				DANCE
				COMMUNITY THEATER (CAST/CREW)
				OTHER- PLEASE LIST
				OTHER - PLEASE LIST
				OTHER - PLEASE LIST

COMMUNITY ACTIVITIES 1 POINT EACH

FR	so	JR	SR	
				BOY/GIRL SCOUTS
				4H
				VOLUNTEER SERVICE (OVER 20 HOURS PER MONTH ONGOING) WHERE? SUPERVISOR:

COMMUNITY ACTIVITIES - 1/2 POINT EACH

FR	so	JR	SR	
				CHURCH YOUTH GROUP
				EMPLOYMENT (OVER 40 HOURS/MONTH) WHERE? SUPERVISOR:
				VOLUNTEER SERVICE (OVER 6-19 HOURS PER MONTH ONGOING) WHERE? SUPERVISOR:

COMMUNITY ACTIVITIES - 1/4 POINT EACH

FR	so	JR	SR	
				CHURCH SERVICE VOLUNTEER
				EMPLOYMENT (UNDER 40 HOURS/MONTH) WHERE? SUPERVISOR:
				VOLUNTEER SERVICE (ONE TIME BASIS) EXPLANATION

- Please include a 1-3 paragraph typed essay (not to exceed one page) on which "PILLAR" of the NHS is your personal strength. (SCHOLARSHIP, LEADERSHIP, SERVICE & CHARACTER)
- Recommendation Forms-Applicants must submit names and email addresses
 of the evaluators to the NHS Advisors. The Advisors will email recommendation
 forms. Forms will not be accepted if turned in by the applicant. It is the
 responsibility of the applicant to keep track of all submissions. Three
 recommendation forms are required. Two MUST be from current teachers. The
 Third may be from a previous teacher, an employer, a pastor/priest/youth group
 supervisor, a coach...

Please complete this form and return it to confidential. Thank you in advance for your honesty		This recomr	mendation will	be kept	
Student Name: Teacher/Evaluate	or Name:				
The student named above is eligible for membership One criterion for membership is Character . A persor responsibility, trustworthiness, caring, and citize	n of character de	monstrates the follo	wing categori	es: respect,	
 Takes criticism willingly and accepts recommendati Cooperates by complying with appropriate rules an Demonstrates the highest standards of honesty, re Shows courtesy, concern and responsibility for other 	nd regulations. liability, and pers	everance.			
Briefly explain in what capacity you have known this	student.				
Please rate the student in the following categories:					
	Superior 5	Above Average 4	Average 3	Below Average 2	Poo 1
espect for self and others					
esponsibility in tasks undertaken; and for own actions					
rustworthiness when given information or duties					
aring demonstrated in interactions with others, and for others					
itizenship demonstrated through appropriate school and ommunity behaviors					
totals					
How strongly do you recommend this student for	or admission in	to the National Ho	onor Society?		
Enthusiastically Recommend Recommend					

Recommend	
Recommend	with Reservation
DO NOT Red	ommend
Evaluator Signature:	
	This recommendation will be destroyed after the selection process is complete.
Additional Comment	s: