**John T. Hoggard Honor Society Application**

Directions:

1. Please visit nhs.kmacgill.com/documents to download and edit this form.
2. Please complete all sections, print, and submit to room 115-S by Wednesday, May 10th to room 115-S (Mr. MacGillivray’s room). The application must be signed by the applicant and a parent/guardian.
3. You will need a large envelope **and** a stapler to submit this application.
4. There are three brief faculty recommendations required.
   1. You will need three letter-sized envelopes for these.
   2. Give the recommendation form and an envelope to the recommending teacher as soon as possible.
   3. The Hoggard faculty member should complete the form, place it in a sealed envelope, and return the envelope to you, the student. The teacher should NOT return the letter to me directly.
   4. You are responsible for delivering the three recommendations in three sealed envelopes with your application.
      * Is your name on this recommendation form?
      * Is the faculty member’s name on the form?
      * Did the faculty member sign the form?
5. Sorry, but **LATE FORMS WILL NOT BE ACCEPTED.**
6. You will be notified of your acceptance, most likely by email.
7. **FORMS MUST BE TYPED. NO HANDWRITTEN FORMS WILL BE ACCEPTED.** Please do not fill out this form with handwriting except as noted.
8. Please remember to sign your application. Please remember to have your parent/guardian sign your application.
9. Put your application in a large envelope. Please staple the pages of your application. I would greatly prefer, but do not require, that you put the rec letters in the large envelope as well.
10. Please start the application now. You will need an evening to fill out the application, and you should allow 3 days to get your teacher recommendations returned to you.

**VIKING CHAPTER OF THE NATIONAL**

**HONOR SOCIETY **

**Honor Society Application**

1. **Administrative Information**

Your Name (typed):

Your Student Number (typed):

Your email address where you can be contacted (typed):

Parent/guardian email address where he/she can be contacted (typed):

**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. Please type this.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Activity (typed)** | **Year** | | | | **Accomplishments (please type)** |
| **9** | **10** | **11** | **12** |
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1. **Leadership Positions**

List all elected or appointed leadership position held in school, community, or work activities. Only those positions in which you were 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 area manager; or community leader. Please type this.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Leadership Position (typed)** | **Year** | | | | **Activity or Organization (please type)** |
| **9** | **10** | **11** | **12** |
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1. **Community Activities**

List community activities in which you have participated and note any major accomplishment in each. These should be any activities outside of school in which you participated for the betterment of your community. For example: church groups, clubs sponsored outside the school, Boy or Girl Scouts, volunteer groups, or community arts endeavors. Please type this.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Community Activity (typed)** | **Year** | | | | **No. of Hour/Wk.** | **Major Accomplishment (typed)** | **Name of Adult Sponsor and Phone # (typed)** |
| **9** | **10** | **11** | **12** |
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1. **Work Experience, Recognition, and Awards**

List below any job experiences, honors, or recognitions that you have received which support your bid to be selected for membership in the National Honor Society. Work experience may be paid or volunteer. Please type this.

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| --- | --- | --- | --- | --- | --- |
| **Work Experience,**  **Recognition or Award (please type)** | **Year** | | | | **Group or Activity/Number of**  **Hours Spent on Job or**  **Volunteer Activity (please type)** |
| **9** | **10** | **11** | **12** |
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**PLEASE NOTE: NO LATE FORMS WILL BE ACCEPTED.** (Forms and recommendations are due to Mr. MacGillivray by Wednesday 5/10/2017 3:30 PM. Mr. Mac’s room is room 115-S.

I have read and understand my obligations to commit time and energy to attending meetings and performing volunteer service upon becoming a member of the National Honor Society.

**YOUR SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PARENT SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

John T. Hoggard High School

National Honor Society

Faculty Recommendation Form #1

**To be filled out by student (please print neatly or type):**

|  |  |
| --- | --- |
| Student name: | Student number: |

**To be filled out by faculty member:**

Dear Faculty Member:

This student is applying to become a member of the JTH National Honor Society. Thank you for agreeing to submit a recommendation form. Please rate the student below, and then seal your recommendation in the provided envelope.

|  |
| --- |
| Name of recommending faculty member: |

To the best of your ability, please rate the candidate on the following criteria by checking the appropriate box.

|  |  |  |  |
| --- | --- | --- | --- |
| Service (please check one box): | | | |
| No reservations | Minimal Reservations | Moderate Reservations | Strong reservations |
|  |  |  |  |

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| --- | --- | --- | --- |
| Character (please check one box): | | | |
| No reservations | Minimal Reservations | Moderate Reservations | Strong reservations |
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| --- | --- | --- | --- |
| Leadership (please check one box): | | | |
| No reservations | Minimal Reservations | Moderate Reservations | Strong reservations |
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Comments:

Signature :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

John T. Hoggard High School

National Honor Society

Faculty Recommendation Form #2

**To be filled out by student (please print neatly or type):**

|  |  |
| --- | --- |
| Student name: | Student number: |

**To be filled out by faculty member:**

Dear Faculty Member:

This student is applying to become a member of the JTH National Honor Society. Thank you for agreeing to submit a recommendation form. Please rate the student below, and then seal your recommendation in the provided envelope.

|  |
| --- |
| Name of recommending faculty member: |

To the best of your ability, please rate the candidate on the following criteria by checking the appropriate box.

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| --- | --- | --- | --- |
| Service (please check one box): | | | |
| No reservations | Minimal Reservations | Moderate Reservations | Strong reservations |
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| --- | --- | --- | --- |
| Character (please check one box): | | | |
| No reservations | Minimal Reservations | Moderate Reservations | Strong reservations |
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| --- | --- | --- | --- |
| Leadership (please check one box): | | | |
| No reservations | Minimal Reservations | Moderate Reservations | Strong reservations |
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Comments:

Signature :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

John T. Hoggard High School

National Honor Society

Faculty Recommendation Form #3

**To be filled out by student (please print neatly or type):**

|  |  |
| --- | --- |
| Student name: | Student number: |

**To be filled out by faculty member:**

Dear Faculty Member:

This student is applying to become a member of the JTH National Honor Society. Thank you for agreeing to submit a recommendation form. Please rate the student below, and then seal your recommendation in the provided envelope.

|  |
| --- |
| Name of recommending faculty member: |

To the best of your ability, please rate the candidate on the following criteria by checking the appropriate box.

|  |  |  |  |
| --- | --- | --- | --- |
| Service (please check one box): | | | |
| No reservations | Minimal Reservations | Moderate Reservations | Strong reservations |
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|  |  |  |  |
| --- | --- | --- | --- |
| Character (please check one box): | | | |
| No reservations | Minimal Reservations | Moderate Reservations | Strong reservations |
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| --- | --- | --- | --- |
| Leadership (please check one box): | | | |
| No reservations | Minimal Reservations | Moderate Reservations | Strong reservations |
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Comments:

Signature :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_