

## **NHS Candidate Information Form**

# PARRISH COMMUNITY HIGH SCHOOL CHAPTER OF THE NATIONAL HONOR SOCIETY



Submission Deadline: February 7, 2025

| Ctuc  | lant | Inforn | nation |
|-------|------|--------|--------|
| SILIC | 1ent | Intorn | nation |

| Name:   |  | Student Number  |
|---|--|---|
| Grade:  | 1 <sup>st</sup> Period Teacher:  | Room #:   |
| NHS Requirements Semester 1   |  |   |
| <ul> <li>DEADLINE to me</li> <li>Semester 2</li> <li>2 Peer Tutoring D</li> <li>8 service hours si</li> <li>Attend a minimun</li> <li>Maintain GPA (3.</li> </ul> Once Per Year <ul> <li>Participate in 1 N</li> <li>Participate in 1 N</li> <li>DEADLINE to me</li> <li>Seniors</li> </ul> | ubmitted n of 2 meetings October Meeting 5 on a 4.0 scale) & no disciplinary issues et Semester 1 requirements is the last Wednes lays ubmitted n of 2 meetings 5 on a 4.0 scale) & no disciplinary issues HS sponsored service project (this is a service a HS sponsored fundraiser (if needed) et ALL requirements | day of the Semester (Dec 17th) activity that NHS comes up with and completes)   |
| All information will be us selection process. Com   | sed by the faculty council to assist with the  | mit it by the published deadline. <b>Do not be modest</b> . fair consideration of your candidacy during the ection. Should you have questions about this form, or 941.803.9330 extension 72547. |
| from core subject teach   | ion form on the last page, students must o   | otain three evaluations. At least TWO must come es). It is highly recommended that students select of the 3 teachers you have asked for a   |
| Teacher 1   | Teacher 2  | Teacher 3   |
| information presented   |  | election to the Honor Society. I attest that the cted, I agree to abide by the standards and gations to the best of my ability  |

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Activities and Leadership Positions**

List up to 6 school-based or community activities in which you have participated. For example, clubs, teams, musical groups, religious groups, Boy or Girl Scouts, community art endeavors, etc. Please include the name and contact information of the adult responsible for supervising your activity/group and their signature. If you are unable to obtain a signature, you must provide and an email from the sponsor/supervior verifying the information below.

In addition, if you held an elected or appointed leadership position, please include the position. Examples: elected officer for the student body, class, or club; committee chairperson; team captain; newspaper editor; work area manager; or other leadership position.

| Activity and Description                 |   | Year |    | Adult Sponsor, Signature of Adult Sponsor, |
|--|---|------|----|--|
|  | 9 | 10   | 11 | and email/phone number                     |
| Check if you held a leadership position. |   |      |    | Position:                                  |
| Check if you held a leadership position. |   |      |    | PRINT Name:                                |
|  |   |      |    | Signature:                                 |
|  |   |      |    | Email:                                     |
|  |   |      |    | Phone Number:                              |
|  |   |      |    | Position:                                  |
| Check if you held a leadership position. |   |      |    | PRINT Name:                                |
|  |   |      |    | Signature:                                 |
|  |   |      |    | Email:                                     |
|  |   |      |    | Phone Number:                              |
|  |   |      |    | Position:                                  |
| Check if you held a leadership position. |   |      |    | PRINT Name:                                |
|  |   |      |    | Signature:                                 |
|  |   |      |    | Email:                                     |
|  |   |      |    | Phone Number:                              |
|  |   |      |    | Position:                                  |
| Check if you held a leadership position. |   |      |    | PRINT Name:                                |
|  |   |      |    | Signature:                                 |
|  |   |      |    | Email:                                     |
|  |   |      |    | Phone Number:                              |
|  |   |      |    | Position:                                  |
| Check if you held a leadership position. |   |      |    | PRINT Name:                                |
|  |   |      |    | Signature:                                 |
|  |   |      |    | Email:                                     |
|  |   |      |    | Phone Number:                              |
|  |   |      |    | Position:                                  |
| Check if you held a leadership position. |   |      |    | PRINT Name:                                |
|  |   |      |    | Signature:                                 |
|  |   |      |    | Email:                                     |
|  |   |      |    | Phone Number:                              |

## **Community Service Hours**

Service activities are those that are done for or on behalf of others (not including immediate family members) for which no compensation (monetary or other) has been given. <u>Your community service hours must be submitted through the school and can be found in your FOCUS account</u>.

Steps to finding your Community Service Hours in FOCUS:

- 1. In FOCUS, select the My Information tab on the left.
- 2. Select the Graduation tab.
- 3. Find the "Number of Community Service Hours" section. Do not include Paid Work Hours. Community Service Hours are only for services you volunteered for and were not paid.

| How many community service hours do you have documented in FOCUS? |  |
|---|--|
|---|--|

#### Additional Community Service NOT Documented in FOCUS

Please list and describe other service hours that you have completed while in high school (including the summer prior to your 9<sup>th</sup> grade year) and **attach a copy** of the SDMC Community/Volunteer Service Project log. **DO NOT SUBMIT ORIGINAL DOCUMENTS – copies only!** 

Only list those not included as part of your hours that have been documented by the school in Focus.

| Organization    | Description of Service Activity | Number of Hours | Adult Sponsor, and email/phone number |
|-----------------|---------------------------------|-----------------|---------------------------------------|
|                 |                                 |                 | PRINT Name:                           |
|                 |                                 |                 | Email:                                |
|                 |                                 |                 | Phone Number:                         |
|                 |                                 |                 | PRINT Name:                           |
|                 |                                 |                 | Email:                                |
|                 |                                 |                 | Phone Number:                         |
|                 |                                 |                 | PRINT Name:                           |
|                 |                                 |                 | Email:                                |
|                 |                                 |                 | Phone Number:                         |
|                 |                                 |                 | PRINT Name:                           |
|                 |                                 |                 | Email:                                |
|                 |                                 |                 | Phone Number:                         |
|                 |                                 |                 | PRINT Name:                           |
|                 |                                 |                 | Email:                                |
|                 |                                 |                 | Phone Number:                         |
| TOTAL Number of | f Hours not documented in FOCUS |                 |                                       |

| A | Cumentea in Focos | Signature:  By signing above, I certify that the total number of service hours accurately and truthfully represents my service to my community and that none of these hours represent activities for which I received compensation of any kind, including a class grade. |
|---|-------------------|--|
|   | cumented in FOCUS |  |

#### Awards, Recognitions and Certifications

Below, list (up to <u>five</u>) awards, recognitions or certifications you received during high school. Examples might include awards from a club on campus, Certificates of Achievement, Science fair awards, TSA awards, Industry Certifications, Fair ribbons, etc. You must attach photos or copies of these awards or some other documentation to verify that you received the award or recognition. <u>DO NOT SUBMIT ORIGINAL</u>
<u>DOCUMENTS – copies only!</u>

Only <u>five</u> awards or recognitions will be considered, so list only the five <u>most prestigious</u> that you have received.

| Award, Recognition, Certification | 9 | 10 | 11 |
|-----------------------------------|---|----|----|
|                                   |   |    |    |
|                                   |   |    |    |
|                                   |   |    |    |
|                                   |   |    |    |
|                                   |   |    |    |

#### **Teacher Evaluations**

Students must obtain three evaluations (see last page). At least two must come from core subject teachers (Math, English, Science, or Social Studies). Only one may come from a coach or club advisor, although a coach/advisor recommendation in <u>not</u> required. It is highly recommended that students select teachers who have known them multiple years. The evaluations can be submitted to you, or the teacher can place them in Mrs. Wildman's mailbox.

This application, including all teacher evaluations, are due no later than 3PM on Friday, February 7th.