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**ABRAHAM LINCOLN HIGH SCHOOL CHAPTER OF**

**THE NATIONAL HONOR SOCIETY**

**Application**

**Student’s Name:** Enter Student’s Name **ID Number:** Enter Student ID # **Grade:** 10 11 12

**E-Mail Address:** Enter Student’s Email Address **Phone Number:** Enter Student’s Phone Number

**ABRAHAM LINCOLN HIGH SCHOOL CHAPTER OF THE NATIONAL HONOR SOCIETY**

**Directions:** All applications and essays must be typed. Applications and essays that are not typed will not be considered. To ensure that the selection process remains fair and unbiased, please put your name ONLY on the cover page. Do not include your name in any of the following responses/essay questions.

All information provided will be used by the faculty council to assist with the fair consideration of your candidacy during the selection process. If you have any questions or need help competing this application, please contact Lincoln’s NHS Advisor, Mr. John Howett (Room 2070) at [john.howett@dmschools.org](mailto:john.howett@dmschools.org), or request assistance from a faculty member of your choice. Please understand that completion of this form does not guarantee selection. Thank you!

**SECTION 1: BACKGROUND INFORMATION (OPTIONAL)**

The following background information – though not specific criterion for NHS membership – will provide the faculty council with the opportunity to get to know you better. Ideally, your responses will help us develop a better defined “picture” of you and your life.

Please list below any work experience and honors/recognition received that support your candidacy for membership in the Honor Society.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **WORK EXPERIENCE** | **YEAR(S)** | | | | **INFORMATION** |
| **9** | **10** | **11** | **12** |
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Please check here if additional information is attached.

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| --- | --- | --- | --- | --- | --- |
| **HONOR / RECOGNITION** | **YEAR(S)** | | | | **INFORMATION** |
| **9** | **10** | **11** | **12** |
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Please check here if additional information is attached.

List all other school-based activities (*not* noted above) in which you have participated. Include clubs, teams, musical groups, Silver Cord of Service, etc., as well as any significant accomplishments in each.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SCHOOL-BASED ACTIVITIES** | **YEAR(S)** | | | | **SIGNIFICANT ACCOMPLISHMENTS** |
| **9** | **10** | **11** | **12** |
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Please check here if additional information is attached.

List other 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: religious groups, clubs sponsored outside the school, Boy or Girl Scouts, etc. Do not repeat participation already listed above.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **COMMUNITY ACTIVITIES** | **YEAR(S)** | | | | **SIGNIFICANT ACCOMPLISHMENTS** |
| **9** | **10** | **11** | **12** |
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Please check here if additional information is attached.

**SECTION 2: LEADERSHIP EXPERIENCE (REQUIRED)**

List all leadership positions/responsibilities at school, home, in the community and at work or volunteer activities. Examples: Elected officer for the student body, class, or club; committee chairperson; team captain; newspaper/yearbook editor; work area manager or trainer; translator; tutor; or other community leader. Please include the name of the adult responsible for supervising your leadership in each role.

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| --- | --- | --- | --- | --- | --- |
| **ACTIVITY / LEADERSHIP ROLE** | **YEAR(S)** | | | | **DETAIL LEADERSHIP EXPERIENCE** |
| **9** | **10** | **11** | **12** |
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Please check here if additional information is attached.

**Additional Comments (Optional):** Click here to enter text.

**SECTION 3: VOLUNTEER / SERVICE EXPERIENCE (REQUIRED)**

List volunteer / service activities in which you have participated. These can be individual or group service projects done either in or out of school. Generally speaking, 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. When possible, please provide the name of an adult supervisor who can verify your participation in each activity and also list the *estimated* number of hours you invested while performing this service.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **VOLUNTEER/SERVICE OPPORTUNITY** | **YEAR(S)** | | | | **# HOURS** | **CONTACT INFORMATION OF**  **ADULT SUPERVISOR** |
| **9** | **10** | **11** | **12** |
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Please check here if additional information is attached.

**Additional Comments (Optional):** Click here to enter text.

**SECTION 4: CHARACTER ESSAY (REQUIRED)**

In an attached essay of 1,000 words or less (1-2 pages), please describe a moment in your life at Lincoln High School when your character was tested. Identify which character trait(s) were tested and how you responded in that moment. Please also share whether you would choose to respond in a similar manner today.

**SECTION 5: NATIONAL HONOR SOCIETY ESSAY (REQUIRED)**

In an attached essay of approximately 500 words or less (1 page), please share briefly (a) what contribution you hope to make to the Lincoln community through your participation in the National Honor Society and (b) what you hope to take away from your participation in the National Honor Society.

**SECTION 6: ADDITIONAL INFORMATION (OPTIONAL)**

IF there is any other information you believe would be helpful in evaluating your candidacy, please explain here:

Click here to enter text.

**SECTION 7: VERIFICATION / SIGNATURES (REQUIRED)**

I understand that completing this form does not guarantee selection to the National Honor Society at Abraham Lincoln High School. 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 have read the information provided above by my son/daughter and can verify that it is true, accurate and complete.

**Parent/Guardian Signature:** **Date:**

Return completed application in a sealed envelope to the main office at Lincoln High School by **8:30 am Thursday, September 17th 2019.**