STUDENT NAME:	HR TEACHER:
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I. School Clubs/Activities/Sports

Advisor: Your signature indicates that this student is/was an active, participating member of your organization. Please check the appropriate year(s) in the box, please indicate the average weekly time commitment or total one time commitment, print your name and signature. Do not sign if the student is simply a name on the roster. Thank you.

ACTIVITY	9	10	11	12	Hours per Week	Total Hours per Year	Printed Name of Advisor/Director/Coach	Advisor/Director/Coach's Signature

II. Community Service Page 2

Please list only those activities in which you were an active, participating member of your organization. Please fill out completely.

ACTIVITY NAME	9	10	11	12	Total Hours	Printed Name of Advisor/Director/Coach And Phone Number	Advisor/Director/Coach's Signature
Description of Communi	ty Servi	ice Pro	vided:				
ACTIVITY NAME	9	10	11	12	Total Hours	Printed Name of Advisor/Director/Coach And Phone Number	Advisor/Director/Coach's Signature
Description of Communi	ty Servi	ice Pro	vided:				
ACTIVITY NAME	9	10	11	12	Total Hours	Printed Name of Advisor/Director/Coach And Phone Number	Advisor/Director/Coach's Signature
Description of Communi	ty Servi	ice Pro	vided:				

ACTIVITY NAME	9	10	11	12	Total Hours	Printed Name of Advisor/Director/Coach And Phone Number	Advisor/Director/Coach's Signature
Description of Communi	ty Servi	ice Pro	vided:				
ACTIVITY NAME	9	10	11	12	Total Hours	Printed Name of Advisor/Director/Coach And Phone Number	Advisor/Director/Coach's Signature
Description of Communi	ty Servi	ice Pro	vided:				
ACTIVITY NAME	9	10	11	12	Total Hours	Printed Name of Advisor/Director/Coach And Phone Number	Advisor/Director/Coach's Signature
Description of Communi	ty Servi	ice Pro	vided:				

III. Character/Leadership

Faculty Member: Your signature attests to the fact that you can vouch for this student's willingness to consistently exemplify desirable qualities of behavior, uphold principles of honesty, morality, reliability and ethics, show an overall commitment to the betterment of Southern Regional High School by being a positive influence in this educational community.

Tea	cher's Signature	Teacher's Printed Name
1.	ener s signavare	Towner STIMOWAY WIND
2.		
3.		
4.		
5.		
IV.	Awards	
T 7	E-mlayment	
V .	Employment	
VI.	Hobbies/Outside Interests	
V 1.	Hobbies, Outside Interests	

VII.	Student's Signature:
Yours	signature attests to the fact that all information provided by you is true, that you are in agree
with tl	he requirements of membership for all National Honor Society students, and that you will st

ment rive to maintain the standards/selection as members of The Helm Chapter of Southern Regional High School and the National Charter. Your signature also attests that you will accept the decision of the faculty council as final, and that you acknowledge that application does not guarantee acceptance into the Helm Chapter of the National Honor Society.

VIII.	Parent's Signature:	
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Please sign when you have read the Student Information Packet which details the selection process, profile of a National Honor Society member and chapter expectations. Your signature also attests that you will accept the decision of the faculty council as final, and that you acknowledge that application does not guarantee acceptance into the Helm Chapter of the National Honor Society.

Paragraph of Introduction: As a word processing document and using the information included on this form, write a paragraph introducing yourself to the Faculty Council. Attach it at the back of the application.

Please make seven (7) copies of this application to turn in. Keep the original for yourself.

No late applications will be accepted.