



National Honor Society - Elkhorn Chapter

Dear Parent and Candidate:

Juniors and seniors at Elkhorn High School with a cumulative GPA of 3.5 or higher are eligible for membership into the Elkhorn Chapter of the National Honor Society. Candidates are evaluated on the basis of the four standards of membership: scholarship, service, leadership, and character by the members of the Faculty Council.

As an academically eligible student, your son/daughter is invited to complete the application for membership to National Honor Society. Completed forms are due to the Counseling Center no later than 3:30 on Thursday, August 23, 2018. All applicants will need to download the application on the EPS website at <http://www.elkhornweb.org/ehs/activities/activities/>. Your son/daughter is also invited to attend a meeting the first week of school during TA to ask any questions about the required forms and obtain additional information regarding membership requirements. Students who submit the necessary forms will be notified by mail as to his/her selection status. Those students who are selected as members of the Elkhorn Chapter of the National Honor Society will be inducted on September 9, 2018 at 4 p.m.

If you have any questions concerning this process, please feel free to contact the advisors or members of the faculty council.

NHS Advisors: Ronda Habrock and Michelle Seger

Faculty Council: John Bacus, Martha Dowd, Kim Johnson, Christine Schultz, and Bob Wolf

2018 Dates:

Informational Meeting: Friday, August 17 during TA

Completed forms due: Thursday, August 23 no later than 3:30

Induction Ceremony: Sunday, September 9 at 4 p.m. at EHS

Grade: _____

Expectations for Members of EHS National Honor Society

Membership in the Elkhorn High School Chapter of the National Honor Society involves commitment on the part of its members. Because it is a service organization, NHS requires involvement and cooperation. This means that one must have the time, the interest and the desire to provide service to others in both this school and this community. In order to maintain the ideals of excellence in scholarship, leadership, character, and service, all members of the NHS must exert a positive influence both inside and outside of the classroom. In addition, members must maintain a cumulative GPA of 3.5 or higher.

Students interested in membership should seriously consider the responsibility attached to the privilege of membership. In accordance with this philosophy, a meeting will be held shortly after induction to discuss the specific time commitments and service requirements established by the Faculty Council.

If selected as a member of the Elkhorn High School Chapter of the National Honor Society, I agree to be an active participant in all aspects of the organization. I realize that my membership is a privilege and is subject to review and possible revocation by the faculty council should I fail to maintain membership requirements.

Printed Name: _____

Date: _____

Signature: _____

Date: _____

Parent Signature: _____

Date: _____

Activities Department Contract

I _____ (Student) understand that as a member of NHS, I will abide by the Elkhorn High School Activities Department Student Handbook. I understand it is my responsibility to follow the information and guidelines stated in the handbook. (A copy of the handbook is available from the NHS sponsors or athletic director.)

I _____ (Parent) understand that my son/daughter, who is a member of NHS, will abide by the Elkhorn High School Activities Department Student Handbook. My signature indicates my support of the activities handbook. (A copy of the handbook is available from the NHS sponsors or athletic director.)

Name: _____

Grade: _____

The following chart lists the co-curricular and extracurricular activities available for high school students. Use the following code to indicate your involvement.

- X = Membership participation only**
- C = Captain (for season-NOT single game captain)**
- P = President**
- O = Officer of organization (other than President)**
- E = Editor**

Must provide sponsor signature or attached documentation of participation.

Organization	9 th grade	10 th grade	11 th grade	12 th grade	Sponsor/Coach Signature
Freshman TA Mentor					
Student Council					
Football					
Volleyball					
Softball					
Cross Country					
Golf					
Basketball					
Swimming					
Wrestling					
Soccer					
Baseball					
Tennis					
Track					
Student Trainer					
Cheerleader					
Dance Team					
Marching Band/Color Guard					
Jazz Band					
Show Choir					
Musical					
School Play					
Debate					
Mock Trial					
Speech Team					
One-Act Play					
Yearbook					
Newspaper					
Robotics					
Power Drive					
Academic Decathlon					
Quiz Bowl					
Junior Class Board					

APPLICATIONS AND FORMS WILL NOT BE RETURNED

Name: _____

Grade: _____

- X = Membership participation only**
- C = Captain (for season-NOT single game captain)**
- P = President**
- O = Officer of organization (other than President)**
- E = Editor**

Must provide sponsor signature or attached documentation of participation.

Organization	9 th grade	10 th grade	11 th grade	Sponsor/Coach Signature
Drama Club				
Pep Club				
FBLA				
FCCLA				
DECA				
SADD				
Foreign Language Club				
Japanese Club				
Olympus Club				

	Recipient	Counselor Signature
CLeW		
HOBY		
Outstanding Sophomore		
Nebraska Leadership Seminar (NLS)		
American Legion Boys/Girls State		
Youth Leadership Omaha (YLO)		
Mayor's Youth Commission		
Attorney General's Commission		

School related awards, honors, or activities not addressed above.				
Organization	9 th grade	10 th grade	11 th grade	Sponsor/Coach Signature

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Name: _____

Grade: _____

Complete this page and the following pages for documentation of service hours. Service hours should represent a variety of serving the community in various ways. Hours accrue beginning the summer before freshman year.

Examples:

- Church/youth groups
- Boy or Girl Scouts
- Volunteer groups or activities
- Elkhorn School carnivals/Elkhorn Public School events
- Peer tutoring/Mentoring

You must provide the following information for each year of service. Any activity without ALL of the information clearly written will not be considered.

Hours will be randomly verified via phone.

- Description of the activity
- Number of hours of participation
- Description of duties performed
- Printed name and title of the adult in charge of the activity
- Signature of the adult in charge of the activity (CANNOT be a parent's signature)
- Contact phone number of the adult in charge of the activity

9 th Total Hours	10 th Total Hours	11 th Total Hours	SERVICE TOTAL

To earn the MAXIMUM number of points for service, a **junior** applicant needs at least **100** documented service hours.

To earn the MAXIMUM number of points for service, a **senior** applicant needs at least **125** documented service hours.

**After applications are submitted, hours will be reviewed and verified by the Faculty Council for approval.*

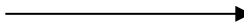
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Name: _____

Grade: _____

If attaching documents, please LIST the activity, hours, duties, and printed name of the adult in charge on this page and write ATTACHMENT in the signature box with a phone number. Please put attachments in the same order as listed below.

**Please print additional pages as needed to document service hours. Hours MAY INCLUDE the summer prior to 9th grade.*

Organization	Total Hours	Activity/Duties performed	Printed name and title of adult in charge of activity	Signature (CANNOT BE PARENT)	Phone number
TOTAL FOR 9TH GRADE SERVICE HOURS 					
ADD ADDITIONAL PAGES AS NECESSARY, TOTAL ON <u>LAST PAGE</u>					

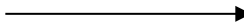
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Name: _____

Grade: _____

If attaching documents, please LIST the activity, hours, duties, and printed name of the adult in charge on this page and write ATTACHMENT in the signature box with a phone number. Please put attachments in the same order as listed below.

**Please print additional pages as needed to document service hours. Hours MAY INCLUDE the summer prior to 10th grade.*

Organization	Total Hours	Activity/Duties performed	Printed name and title of adult in charge of activity	Signature (CANNOT BE PARENT)	Phone number
TOTAL FOR 10TH GRADE SERVICE HOURS 					
ADD ADDITIONAL PAGES AS NECESSARY, TOTAL ON <u>LAST PAGE</u>					

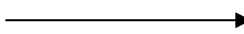
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Name: _____

Grade: _____

If attaching documents, please LIST the activity, hours, duties, and printed name of the adult in charge on this page and write ATTACHMENT in the signature box with a phone number. Please put attachments in the same order as listed below.

**Please print additional pages as needed to document service hours. Hours MAY INCLUDE the summer prior to 11th grade and summer after 11th grade as needed.*

Organization	Total Hours	Activity/Duties performed	Printed name and title of adult in charge of activity	Signature (CANNOT BE PARENT)	Phone number
TOTAL FOR 11TH GRADE SERVICE HOURS 					
ADD ADDITIONAL PAGES AS NECESSARY, TOTAL ON <u>LAST PAGE</u>					

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Name: _____

Grade: _____

One of the expectations of Elkhorn High School NHS members is participation in the Peer Tutor Program. NHS members serve as tutors to other EHS students who make that request. Please outline below availability and subject preferences so tutor pairings can be made when needed.

I am willing to tutor the following subjects:		

I am available	BEFORE SCHOOL	STUDY HALL	AFTER SCHOOL
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

Please complete your first semester class schedule.

Teacher Advisor	
First Period	
Second Period	
Third Period	
Fourth Period	
Fifth Period	
Sixth Period	
Seventh Period	

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Printed Name: _____ Grade: _____

Please **initial** each line as you turn in your forms.

- ___ Name and grade clearly written at the top of each page
- ___ Expectation agreement signed by both applicant and parent
- ___ Activities/Organizations and awards pages completed **WITH all signatures**
- ___ Service hours TOTAL page stapled with each year's page
- ___ Service hours ordered sequentially and totaled on each page **WITH verification signatures and contact phone number**
- ___ Peer Tutor Program form complete
- ___ **Did you make a copy for your records? **Especially your service hour documentation for ACHIEVE scholarships**

Reminder: You will NOT get this application back.

I hereby attest that my activities and service hours are complete and accurate to the best of my knowledge.

Signature: _____

Date: _____