**STUDENT ACTIVITY INFORMATION FORM**

**Purpose of document:** To provide Walton’s NHS selection committee with information related to a candidate’s leadership and service experience while in high school. This document is **NOT** an application for membership. All academically eligible students with a demonstrated interest in participating in NHS will be considered for membership.

**Directions:** Please complete all sections. Do not be modest. Please include any information you feel could be used by the faculty council to assist with the selection process. Completion of this form does not guarantee selection.

**I. INFORMATION**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Homeroom Teacher\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you attended Walton your entire high school career? \_\_\_\_\_\_\_\_\_\_\_

 If no: When did you enter Walton? 9 fall 9 spring 10 fall 10 spring 11 fall 11 spring

 Previous high school (full name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Full address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**II. CLUBS, SPORTS, FINE ARTS AT WALTON HIGH SCHOOL**

List all activities in which you have participated during your high school years. Include clubs, teams, musical groups, etc. and major accomplishments in each. If you have transferred to Walton from another school, please indicate activities for that school with an \*. Give the name, state, name and contact information (phone or e-mail) of the contact person at this school. Attach additional sheets as needed.

\* Limit this section to Walton only groups that are **recognized** by our school administration (or the admin at your old school)

|  |  |  |
| --- | --- | --- |
| **ACTIVITY** | **YEAR** | **EXPLANATION** |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |

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| --- | --- | --- | --- | --- |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |

**III. HONOR SOCIETY INVOLVEMENT**

Indicate which honor societies you have been affiliated with during your high school experience.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Organization | Beta Club | Mu Alpha Theta (Math) | Science Honor Society | English Honor Society | Rho Kappa (SS) | (World Lang) Honor Society | Art Honor Society | Music Honor Society | Other:\_\_\_\_\_\_\_\_ | Other:\_\_\_\_\_\_\_\_ |
|  Participate? | 11 | 10 11 | 10 11 | 10 11 | 10 11 | 10 11 | 10 11 | 10 11 | 10 11 | 10 11 |
| Did you complete all responsibilitiesto the group? | YesNo | YesNo | YesNo | YesNo | YesNo | YesNo | YesNo | YesNo | YesNo | YesNo |

**If “NO” explain.**

**IV. LEADERSHIP POSITIONS**

List all the elected or appointed leadership positions held in Walton groups and /or community /church activities. Include only those positions in which you were directly responsible for directing or motivating others should be included. If you have transferred to Walton from another school, please indicate activities for that school with an \*. Give the name, state, name and contact information (phone or e-mail) of the contact person at this school. Attach additional sheets as needed.

\*If you split, shadow, or share a leadership position, you must indicate how many others are also participating in this.

1. **AT WALTON HIGH SCHOOL**

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| --- | --- | --- |
| **ACTIVITY** | **YEAR** | **EXPLANATION** |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |

1. **IN THE COMMUNITY**

|  |  |  |
| --- | --- | --- |
| **ACTIVITY** | **YEAR** | **EXPLANATION** |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |

 **IV. COMMUNITY/RELIGIOUS ACTIVITIES**

List community activities in which you have participated and note any major accomplishment in each. These should be any activity outside of school in which you participated for the betterment of your community or you and your family. For example, list clubs sponsored outside of school, club teams, Boy or Girl Scouts, volunteer groups, mission trips, and/or art or musical endeavors.

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| --- | --- | --- |
| **ACTIVITY** | **YEAR** | **EXPLANATION** |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
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|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |

 Contact information for activities listed above.

|  |  |  |  |
| --- | --- | --- | --- |
| **Contact Name** | **Title and name of Organization** | **Address and Phone number** | **e-mail address** |
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**V. HONORS, RECOGNITIONS, AND AWARDS**

List any experiences, honors, or recognitions that you have received which support your bid to be selected for membership in the National Honor Society.

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| --- | --- | --- |
| **ACTIVITY** | **YEAR** | **EXPLANATION** |
|  | 9 | 10 | 11 |  |
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|  | 9 | 10 | 11 |  |
|  | 9 | 10 | 11 |  |

I certify that all the information stated in this Activity Information Form is true, accurate, and correct. Additionally, if contacted the people listed in this document can validate the information listed in this document.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of candidate Date

Please return this form (completed and in a paper/print copy format) to room 419 (Edwards) or room 318 (Staruch) ***no later*** than Friday, March 31, 2023 at 3:40 pm. You are welcome to return this document early. Students not returning the form will be evaluated for membership based on what Walton’s faculty limited knowledge about your involvement in leadership and service opportunities.