

910 Russell Street
 Augusta, Georgia 30904
 Telephone (706) 737-7152
<http://arc.rcboe.org>

Academy of Richmond County
 Established July 31, 1783

Mr. Jason Medlin, *Principal*
 Mr. Scott Guinn, *IB Dean*
 Mr. Matthew Ryan, *NHS Sponsor*



NHS Candidate Information Form

ACADEMY OF RICHMOND COUNTY CHAPTER OF THE NATIONAL HONOR SOCIETY

Directions: Please complete all sections. Type or print all information and submit it by the published deadline. **Do not be modest. Attach as many additional pages as necessary to give the selection committee a full overview of your accomplishments.** All information will be used by the faculty council to assist with the fair consideration of your candidacy during the selection process. **Completion of this form does not guarantee selection.**

Should you have questions about this form, please contact Mr. Ryan.

Student Information

Name _____ Cumulative GPA (*available from guidance*) _____

Grade level _____ Homeroom _____

Leadership Positions

List all elected or appointed leadership positions you have held in school, community, or work activities. Only those positions in which you were responsible for directing or motivating others should be included. Examples: elected officer for the student body, class, or club; committee chairperson; team captain; newspaper editor; work area manager; or other community leader. Please include the name of the adult responsible for supervising your leadership in each position.

Activity	Year				Accomplishments/Adult Sponsor
	9	10	11	12	

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Service Activities

List service activities in which you have participated. These can be individual or group service projects done either in or out of school [unless your faculty council specifically limits service to school activities only]. 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. Please ask an adult supervisor who can verify your participation in each activity to sign on the appropriate line, and also list the estimated number of hours you invested while performing this service.

Activity	Year				Adult Sponsor
	9	10	11	12	

Other Student Activities

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

Activity	Year				Adult Sponsor
	9	10	11	12	

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Other Community Activities

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, community art endeavors, etc. Do not repeat participation already listed above. Please include the name of the adult supervisor of each activity.

Activity	Year				Adult Sponsor
	9	10	11	12	

Work Experience, Recognition, and Awards

Though not a specific criterion for membership, please list below any job experiences, honors, or recognition you have received that support your candidacy for membership in the Honor Society. Work experience may be paid or volunteer.

Description & number of hours	Year				Adult Sponsor
	9	10	11	12	

Signatures

I understand that completing this form does not guarantee selection to the Honor Society. 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 by my son/daughter on this form and can verify that it is true, accurate, and complete.

Parent/Guardian Signature: _____ Date: _____

Return completed forms to Mrs. Register in the Front Office by December 17