

National Honor Society Member Data Sheet

First name _____ Middle _____ Last _____

Full address (number and street name) _____

Apartment# _____ City _____ Zip code _____

Phone number _____ Home/parent number _____

Best way to contact you? _____

Do you drive to school? _____

1st Semester Schedule

2nd Semester Schedule

Period	Class	Teacher	Period	Class	Teacher
Homeroom/ Intervention	xxxxxxxxxxxxx		Homeroom/ Intervention	xxxxxxxxxxxxx	
1 st					
2 nd					
3 rd					
4 th					
5 th					
6 th					
7 th					

-----DO NOT WRITE BELOW THE LINE. ..FOR SECRETARIAL USE ONLY-----

Total 1st semester service hours _____

Total 2nd semester service hours _____

Number of meetings attended _____

Dates of attendance: ___Sept. ___Oct. ___Nov. ___Dec. ___Jan. ___Feb. ___Mar. ___

Apr. ___

Paid dues _____

Recommended for NHS graduation stole _____