



# Olathe Northwest National Honor Society

## Student Activity Information Form

### Part I: Student Information

Student Name \_\_\_\_\_ Grade 11 12 Student # \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_ Primary Telephone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Primary Street Address \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

Student e-mail \_\_\_\_\_ Parent/Guardian e-mail \_\_\_\_\_

**Name as you would like it to appear on your NHS certificate (Please print)**

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Did you attend ONW last year? Yes No If no, where did you attend? \_\_\_\_\_

What is the best way to contact you? \_\_\_\_\_ What is the best way to contact your parents? \_\_\_\_\_

Have you been a member of NHS at another school? Yes No If so, where? \_\_\_\_\_

Did you resign or were you removed? \_\_\_\_\_ Explain. \_\_\_\_\_

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**Part II: School Activities**

<b>Schedule First Semester</b>		<b>Schedule Second Semester</b>	
<b>First Period</b>		<b>First Period</b>	
<b>Class</b>	<b>Teacher/Room</b>	<b>Class</b>	<b>Teacher/Room</b>
<b>Second Period</b>		<b>Second Period</b>	
<b>Class</b>	<b>Teacher/Room</b>	<b>Class</b>	<b>Teacher/Room</b>
<b>Third Period</b>		<b>Third Period</b>	
<b>Class</b>	<b>Teacher/Room</b>	<b>Class</b>	<b>Teacher/Room</b>
<b>Fourth Period</b>		<b>Fourth Period</b>	
<b>Class</b>	<b>Teacher/Room</b>	<b>Class</b>	<b>Teacher/Room</b>
<b>Fifth Period</b>		<b>Fifth Period</b>	
<b>Class</b>	<b>Teacher/Room</b>	<b>Class</b>	<b>Teacher/Room</b>

<b>Extracurricular/ School Activities</b>
<b>Sponsor Name</b>
<b>Organization</b>
<b>Sponsor Name</b>
<b>Organization</b>
<b>Sponsor Name</b>
<b>Organization</b>
<b>Sponsor Name</b>
<b>Organization</b>

Sixth Period		Sixth Period	
Class	Teacher/Room	Class	Teacher/Room
Seventh Period		Seventh Period	
Class	Teacher/Room	Class	Teacher/Room

<b>Sponsor Name</b>
<b>Organization</b>
<b>Sponsor Name</b>
<b>Organization</b>

**Part III: Outside-of-School Activities**

Community Activities	
<b>Supervising Adult</b>	<b>Supervising Adult</b>
<b>Organization / Activity</b>	<b>Organization / Activity</b>
<b>Supervising Adult</b>	<b>Supervising Adult</b>
<b>Organization / Activity</b>	<b>Organization / Activity</b>
<b>Supervising Adult</b>	<b>Supervising Adult</b>
<b>Organization / Activity</b>	<b>Organization / Activity</b>

**Part IV: Work Experience, Recognition, Awards**

Though not specific criteria for membership, please list below any work experience, honors, or recognitions you have received that would support your candidacy for membership in the Olathe Northwest Honor Society. Work experience may be volunteer or paid.

<b>Year</b>	<b>Job, Recognition, Award</b>	<b>Group/Activity</b>	<b>Supervising Adult</b>
<b>9</b>			
<b>10</b>			
<b>11</b>			
<b>12</b>			