SPHS National Honor Society
Request to Consider Additional Outside Activities

Name_______________________________________ Hours worked____

In the space below, briefly describe the activity. Give dates and the amount of time spent planning for and for the event itself. Please give us, in some detail, exactly what your role was in the activity, how it supports one of the pillars of NHS (scholarship, character, service or leadership). Merits are awarded based on the number of hours worked but will not exceed 3 merits and will be approved/disapproved by the officers and faculty advisors for NHS.

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Please have an adult supervisor or sponsor sign off here verifying this event:

Adult Sponsor/Coach/Advisor:  (Print name)____________________________________________
Adult Sponsor/Coach/Advisor:  (Signature)_____________________________________________
Adult Sponsor/Coach/Advisor Contact Number or email-_________________________________

On the lines below, please print (legibly!!) the names of other NHS members who also participated in this event. If you are not sure of their membership, list their names anyway.