



Please follow the instructions at the bottom of this page. You will need two (2) recommendations from two different academic teachers only.

PLAN AHEAD. Give the teachers ample time to complete your recommendation form. This form **MUST** be turned in by 3:30 p.m. on Friday, February 12.

Recommendation for NHS membership for (Your Name) _____

Submitted by (Teacher's name) _____

How long and in what capacity have you known this candidate? _____

Please rank the candidate in the following areas. If you feel unqualified to rank the candidate in these areas, please return the form to the student.

Leadership	Above Average	Average	Below Average	Not applicable
Is resourceful in solving problems				
Demonstrates academic and personal integrity				
Demonstrates initiative				
Exercises positive influence on peers				
Delegates responsibilities				
Exemplifies positive attitudes				
Inspires positive behavior in others				
Holds positions of responsibility				
Demonstrates reliability and dependability				

Character	Above Average	Average	Below Average	Not applicable
Honest and Reliable				
Courteous				
Demonstrates Respect				
Tolerant				
Compassionate				
Reacts well to success				
Reacts well to failure				
Cooperative				

Please circle one,

Student is: highly recommended // recommended // recommended with reservations // not recommended for membership in the THMS National Honor Society.

Additional Comments: Please write additional comments on the back of this sheet.

TEACHERS:

This will be confidential. The student should provide an envelope. Please seal this form inside the envelope and write your signature across the sealed flap. Return the sealed, signed envelope to the student or put it in Ms. Berens or Ms. Straube's mailbox by 2/12/2016.