



SPANISH HONORS SOCIETY APPLICATION

TO BE COMPLETED BY APPLICANT:

Name: _____ Date: _____

Student Number: _____ Grade Level: _____

ARE YOU ABLE TO PARTICIPATE IN SPANISH HONORS SOCIETY MEETINGS ON EVERY OTHER WEDNESDAY?

YES NO

**ON THE LINES BELOW, PLEASE EXPLAIN WHY YOU WOULD LIKE TO BE A MEMBER OF THE SPANISH HONORS SOCIETY
(continue on back if needed)**

TEACHER RECCOMENDATIONS: (2 required)

1. TEACHERS NAME: _____

WOULD YOU RECOMMEND THIS STUDENT TO BE A MEMBER OF THE SPANISH HONORS SOCIETY?

YES NO

TEACHERS COMMENT (OPTIONAL):

TEACHERS SIGNATURE: _____ **DATE:** _____

2. TEACHERS NAME: _____

WOULD YOU RECOMMEND THIS STUDENT TO BE A MEMBER OF THE SPANISH HONORS SOCIETY?

YES NO

TEACHERS COMMENT (OPTIONAL):

TEACHERS SIGNATURE: _____ **DATE:** _____

TO BE COMPLETED BY YOUR GUIDANCE COUNSELOR:

WEIGHTED GPA: _____

SIGNATURE OF GUIDANCE COUNSELOR: _____

Please return to Mr. McFarlane, Room 723.