

Spartan Honor Society

Name _____ Date _____

Leadership Goal Sheet

•**Leadership:** elected leaders of student government or school/community clubs. Members of student government or clubs must take a leadership role in specific tasks or projects. - 16 hours

Who will you be working with? (Please include the name of the sponsor or supervising adult(s))

What will you accomplish?

How often will you be working as a leader? (16-hour requirement)

Where will you be performing these activities?

Why did you choose this goal?

GOAL APPROVED _____ (parent) DATE _____

GOAL APPROVED _____ (SHS advisor) DATE _____

- Goals must be approved by parents before submission to SHS advisors.
- Goals must be approved by SHS advisors before service is started.

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Leadership Petition

• ***Leadership***: elected leaders of student government or school/community clubs. Members of student government or clubs must take a leadership role in specific tasks or projects. - 16 hours

SPECIFICALLY DESCRIBE YOUR LEADERSHIP ROLE AND WHAT YOU WERE ABLE TO ACCOMPLISH:

Whenever possible bring in photographs of team, membership cards, certificates, or awards to verify your participation in these activities. These will be returned to you.

VERIFICATION OF SPONSORING OR SUPERVISING ADULT

This student has spent sixteen or more hours as a leader in the activity described above during the time they have attended Arcade Middle School.

Parents may not sign in place of the sponsor or supervising adult.

Sponsor's Name (please print) _____

Sponsor's Signature _____

Sponsor's position _____

Phone # _____ email _____

Additional sponsors may write this information on the back of this paper.

Petition Approved _____ (SHS advisor) Date _____

This document will not be accepted unless it is stapled in the following order: petition, goal sheet, log sheet, other documents (report cards, participation forms, etc.).