Eta Sigma Alpha National Home School Honor Society 2025-2026

Lambda Omicron Chapter: NEW MEMBERSHIP APPLICATION

Student Full Name: (as desired on certificate)

_____

Nickname: _____**Grade:** _____

Address:

_____

Home Phone: _____**Student's Cell Phone:** _____

Are you interested in using a Group Text Chat? YES____ NO_____

Student's E-mail: _____ **Food Allergies/Sensitivities:** _____

Parent Name(s):

_____

Parent E-mail: _____ **Parent Cell Phone:** _____

Emergency Contact: Name:

_____

Emergency Contact Phone: _____

Standardized Test (circle one): CLT SAT ACT PSAT Iowa Stanford Terra Nova

Date Taken: _____

Meetings*: Chapter meetings will be held monthly, Time & Location TBD each fall. Meeting dates are subject to change based on weather and unforeseen issues. All members will be notified via email if any changes are made. Parents of members and adult advisors will be required to assist in maintaining a two-adult presence at official Lambda Omicron Chapter service projects and meetings or the event will need to be canceled. All students participating in NHS service projects do so at their own risk. Social gatherings outside of official meetings or service projects are not covered under CHESS insurance and not considered official Lambda Omicron events. Therefore, any social gatherings of the NHS members are under the supervision and responsibility of the parents involved.

- **Write an essay (minimum 250 words) discussing ONE of the following:**

    1. Why would you like to join the Lambda Omicron Chapter of the Honor Society?
    2. In your experience, what does leadership look like?
    3. What does success mean to you?

- **Submit a printed copy of essay with application.**

I have read and understand the parent and student commitments outlined in the Lambda Omicron Bylaws (can be found at https://chessclasses.org/honor-society).

I have read and understand the details described under the meeting heading above.

I certify that all information provided here is true, accurate and complete.

Student Signature: _____Date: _____

Parent Signature: _____ Date: _____

Submit this application and complete packet including all of the following to Mary Beth Balint:

□ Membership Application □ $50 Dues (check made payable to: Tara Taylor)

□ Essay (250-word minimum) □ Copy of Qualifying Test Scores: Not more than 1 year old

□ Signed Proctor Note □ List of currently enrolled CHESS courses (if applicable)

□ Copy of an Official High School Transcript sealed **and signed over the seal by parent (**9th grade submits 8th grade transcript)

□ Letter of Recommendation from a non-relative in a sealed envelope (with signature over seal) or directly mailed or emailed from the evaluator to Vanessa Fleisher, 5719 Spriggs Meadow Dr, Woodbridge, VA 22193

□ Submit Application and all supporting documents by mail or hand in to Vanessa Fleisher by September 24, 2025.

Questions? Email Vanessa Fleisher: vanessa.fleisher@gmail.com