

**RACHEL'S DAUGHTERS OF RIVERDALE HIGH SCHOOL
MEMBERSHIP APPLICATION**

APPLICANT INFORMATION

Name: (Last)	(First)	(Middle)
Date of birth:	Student ID#:	Homeroom Teacher:
Current address:		
City:	State:	ZIP Code:
Phone: (H)	(C)	Email:

PARENT/ GUARDIAN INFORMATION

Father's Name:	Mother's Name:
Address:	Address:
City:	City:
State:	State:
ZIP Code:	ZIP Code:
Phone:(H) (C)	Phone:(H) (C)
Email:	Email:

EMERGENCY CONTACTS

Name of a person to contact in case of emergency:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		
Name of a person to contact in case of emergency:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		

EXTRACURRICULAR & CAMPUS LEADERSHIP ACTIVITIES
(Please attach an additional sheet if necessary)

Organization Name:	Sponsor Name:
Meeting Days & Times:	Current & Past Positions:
Organization Name:	Sponsor Name:
Meeting Days & Times:	Current & Past Positions:

ACADEMIC & CAREER INTERESTS

Favorite Subject(s)	Potential College Major(s)	Future Career Interest(s)



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CHARACTER REFERENCES LIST

(Additional forms must be completed by a teacher, community, or religious leader)

Name:	Name:
Relationship:	Relationship:

SIGNATURES

I authorize the sponsors of Rachel's Daughters to verify the information I have provided on this form as to my scholarship and character. I have received a copy of this application. By submitting and signing this application for membership, I agree to the following:

1. Abide by all of the rules and regulations of the organization;
2. Maintain scholarship in all of my core courses at or above a 75% average;
3. Abstain for all behavior that would cause harm to any of the members and/or the organizational reputation of Rachel's Daughters (both on and off campus);
4. Agree to represent my organization to the best of my ability by participating in a minimum of 3 service learning initiatives annually; and
5. Agree to always walk with the "dignity, character, and class" that is becoming of "A New Generation of Leaders & Teachers" and a member of the Riverdale High School study body.

Signature of Applicant:	Date:
Signature of Parent/Guardian	Date:

**Please return this application with 2 completed reference forms to:
Ms. Holmes (Room B-215).**

Membership Application Rec'd By: _____ Date: _____

Membership Application Reviewed By: _____

Interview Scheduled For: _____ Time: _____ Location: _____

Interview Conducted By: _____ Title: _____
_____ Title: _____
_____ Title: _____

Applicant Approved (please initial): _____ Applicant Denied (please initial): _____

Reason (if denied): _____

Mentor Teacher Assigned: _____ Room Number: _____

Subject(s) taught: _____ Email: _____



Please rate the applicant with respect to the following characteristics. Use 1 as an indication of weakness and 5 as an indication of strength. Use n/a if you have no basis for judgment.

<i>Physical condition</i>	n/a	1	2	3	4	5
<i>Adaptability</i>	n/a	1	2	3	4	5
<i>Responsiveness to others' needs</i>	n/a	1	2	3	4	5
<i>Ability to express feelings</i>	n/a	1	2	3	4	5
<i>Sense of humor</i>	n/a	1	2	3	4	5
<i>Cooperation</i>	n/a	1	2	3	4	5
<i>Creativity</i>	n/a	1	2	3	4	5
<i>Emotional maturity</i>	n/a	1	2	3	4	5
<i>Punctuality</i>	n/a	1	2	3	4	5
<i>Initiative</i>	n/a	1	2	3	4	5
<i>Leadership ability</i>	n/a	1	2	3	4	5
<i>Sense of responsibility</i>	n/a	1	2	3	4	5

List three adjectives or descriptive words/phrases which come to mind given your perception of the applicant.

Circle the number below which best describes your overall rating of the applicant.

- | | | | |
|---|-------------------------------------|---|----------------------------|
| 1 | Very weak, should be discouraged | 4 | Good, better than many |
| 2 | Might be OK, with some reservations | 5 | Very good, no reservations |
| 3 | Recommend, no strong feelings | 6 | Exceptional, rare find |

We would appreciate if you would include on a separate page any other comments or information which would help us in evaluating this applicant or placing him/her in a particular work situation.

Your Name : _____ Phone/Room #: _____

Email: _____ Signature: _____ Date: _____

May we contact you if necessary? No Yes



Character Reference Form #2

Applicant's Name: _____ **Student ID#:** _____

Please assess the applicant on her/his ability and readiness to thrive and to manage the demands of both challenging service work and community living. Your time and effort is greatly appreciated and very helpful to us. You may answer the following questions on a separate sheet of paper if you prefer.

Your responses will remain confidential.

1. How long and how well have you known this applicant? Describe the situation(s) in which you have known her/him.

2. Rachel's Daughters of RHS is an all-female, peer education and service learning organization. Based on the principles of leadership, scholarship, service, and faith, the organization is dedicated to the betterment of Riverdale High School via student-centered activities, seminars, and training sessions. Have you seen the applicant living out the values of this organization? Explain.

3. What interpersonal skills does the applicant possess? Lack?

4. How well does the applicant respond to stressful situations? (Cite an example, if possible.)

5. Can this person be counted on to follow through on significant commitments? Explain and give examples if possible.



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<i>Creativity</i>	n/a	1	2	3	4	5
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Email: _____ Signature: _____ Date: _____

May we contact you if necessary? No Yes

