



## 2023—2024 LEAD Student Advisory Committee Recommendation Form

| Student and School Information |  |
|--------------------------------|--|
| Student's Name                 |  |
| School Name                    |  |

| Recommender Information                                    |  |
|--|--|
| First & Last Name  |  |
| Role/Position<br><i>(NHS/NSC Adviser, Principal, etc.)</i> |  |
| Email  |  |

**Is this student a current member of your school's National Honor Society or National Student Council chapter?**

YES     NO

**Please explain why this student should be selected to serve on the LEAD Student Advisory Committee:**

  
  
  
  
  
  
  
  
  
  

\_\_\_\_\_  
Recommender Signature

\_\_\_\_\_  
Date