

# APPLICATION FOR LAMBDA SIGMA 2005-06

Thank you for applying for membership into the 2005-06 Lambda Sigma Chapter of Westminster College. The purpose of Lambda Sigma, the national sophomore men's and women's honor society, is to demonstrate leadership, scholarship, service, and fellowship among men and women of the sophomore class. It is also our purpose to stimulate interest in scholarship, leadership, participation in activities, and the development of character among freshman men and women. This purpose manifests itself in many different ways, but with the overriding concept of serving and promoting the best interests of our College in every way possible. With this in mind, on a separate typewritten, double-spaced sheet of paper, respond to the following 300 words or less:

*Talk about one specific event in your life that was instrumental in shaping your leadership skills. How will you apply that to your work in continuing Lambda Sigma's success on the Westminster campus?*

NAME \_\_\_\_\_  
Last First Middle

LOCAL ADDRESS \_\_\_\_\_ MAILBOX \_\_\_\_\_  
Residence Hall Room #

HOME ADDRESS \_\_\_\_\_  
Street City State Zip

HOME PHONE # \_\_\_\_\_ ACADEMIC MAJOR \_\_\_\_\_  
(Area Code)

PARENTS' NAMES \_\_\_\_\_

ADDRESS \_\_\_\_\_  
City State Zip

Do you give permission for this data, including your Q.P.A. to be released to the Executive Secretary of the National Society of Lambda Sigma IF you are tapped for membership? This information is needed for the national organization's review prior to their giving permission for tapping. Please check the appropriate response.

\_\_\_\_\_ Yes \_\_\_\_\_ No

Please list your present and past Westminster College activities and community service. (Indicate any offices held.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**Applications are due in the Student Affairs Office by 4:30 p.m. on Friday, February 28, 2005.**

Please list below as references your RA or a member of the Residence Life Staff who knows you best, and a member of the faculty or administration. You will give these individuals reference forms (yellow to Residence Life staff, white to faculty or administration) to complete and return to the Student Affairs Office. Keep in mind that you will be evaluated in three areas: Leadership, Service, and Character.

**LAMBDA SIGMA HONOR SOCIETY REFERENCE FORM**

**Residence Life Staff**

Please evaluate the candidate, who has selected you as a reference, on the basis of leadership, service and character. Do this on a scale of 1-10 (with 10 as the best score), and circle a score in the appropriate spaces provided below. If you feel you are unable to evaluate an applicant on any of the criteria, just leave a blank where it is appropriate. If you would like to make any comments, please do so on the back of this evaluation form. When you have completed this form, please return it to the Student Affairs Office by **Monday, February 28, 2005**. It is very important that we receive this evaluation form because, without it, the candidate's application cannot be processed.

We greatly appreciate your cooperation and we thank you for being a part of the selection process.

Below are some guidelines in defining the three criteria used:

- Leadership:**
- Is respected by his/her peers and is able to render authority.
  - Is well organized and highly motivated.
  - Is creative in lending ideas.
- Service:**
- Is actively involved in the campus community.
  - Shows a willingness and desire to perform services for others.
  - Is sensitive to the needs of fellow students and the needs of Westminster College.
- Character:**
- Is cooperative and able to get along well with others.
  - Is unselfish and shows a genuine concern for others.
  - His/her lifestyle is an example of high moral standards for others to follow.

**Applicant's Name**

**Evaluator's Name**

\_\_\_\_\_

\_\_\_\_\_

**Leadership**

1 2 3 4 5 6 7 8 9 10

**Service**

1 2 3 4 5 6 7 8 9 10

**Character**

1 2 3 4 5 6 7 8 9 10

**LAMBDA SIGMA HONOR SOCIETY REFERENCE FORM**

**Faculty/Administration**

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**Evaluator's Name**

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\_\_\_\_\_

**Leadership**

1 2 3 4 5 6 7 8 9 10

**Service**

1 2 3 4 5 6 7 8 9 10

**Character**

1 2 3 4 5 6 7 8 9 10