



**ETA SIGMA ALPHA**  
National Home School Honor Society

Lambda Gamma Chapter  
York County, SC

**APPLICATION**

Send to Martha Andersen, 2930 Brookridge Dr., Rock Hill, SC 29732

Date \_\_\_\_\_

Student's Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Current Grade Level \_\_\_\_\_

Date of Birth \_\_\_\_\_

**Please see information section for specific requirements.**

Test Scores

Test \_\_\_\_\_ Score \_\_\_\_\_ Date of Test \_\_\_\_\_

Administered by \_\_\_\_\_

Please attach copy.

High School Grade Point Average \_\_\_\_\_

Please attach transcripts.

Letters of Recommendation (2)

Letters of recommendation will be received from (1.) \_\_\_\_\_, email \_\_\_\_\_,

telephone \_\_\_\_\_ and (2.) \_\_\_\_\_, email \_\_\_\_\_,

telephone \_\_\_\_\_.

Essay

Please attach.

Code of Conduct

I, \_\_\_\_\_, agree to uphold and abide by the Code of Ethics and Conduct at stated in the information section. I understand that my conduct, words, and deeds should reflect Christian principles at all times while participating in the Lambda Gamma Chapter of the Eta Sigma Alpha National Home School Honor Society.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's signature \_\_\_\_\_

