



City of St. Petersburg Student Citizen of the Month Nomination Form

Date: _____

Name of Nominee: _____

Address: _____

City: _____ State: _____ Zip: _____

School Name: _____ Grade: _____

Daytime Phone Number: _____ Evening Phone Number: _____

E-mail address: _____

Please describe how this person has worked to improve the quality of life in St. Petersburg (100 words or less, please attach additional sheet if necessary):

Please provide a short biographical history of nominee (100 words or less, including numbers of years residency, profession, other pertinent history, etc. Please attach additional sheet if necessary):

Nominated by (self nominations accepted): _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____ Evening Phone Number: _____

E-mail address: _____