



Return to:  
Elementary School Main Office  
Middle School Guidance Office  
High School Guidance Office  
by **October 16, 2020**

**Spartanburg School District 3  
ACADEMIC ATLAS 2020-2021  
Self-Nomination Form**

PLEASE PRINT:

Student's **full** name (first, middle, last): \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_  
\_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Home Phone Number: \_\_\_\_\_

Homeroom Teacher Name: \_\_\_\_\_

**I feel that I should be in Academic ATLAS because:**

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Student Signature \_\_\_\_\_ Date: \_\_\_\_\_