

# GEORGIA STATE USBC YOUTH ASSOCIATION

## Board Application - Deadline July 10, 2010

In adherence to the USBC Association Policy Manual, all individuals seeking to serve on the Georgia State Youth Board as an Officer or Director are required to submit an application for consideration.

The Signature of Local Association Manager is not required for existing State Youth Board Member; however they are also required to submit a complete application to serve of the Board.

Nominee must be a USBC member in good standing at the time of election and throughout their term.

Candidate Form - Nomination for the Office [  ] **President** [  ] **Director**

Are you currently a State Youth Board Member \_\_\_\_\_ Current position held \_\_\_\_\_

PRINT

Name: \_\_\_\_\_ Age if under 18 \_\_\_\_\_

Home Address : \_\_\_\_\_ APT # \_\_\_\_\_

City : \_\_\_\_\_ State : \_\_\_\_\_ Zip : \_\_\_\_\_

Telephone (Day time) \_\_\_\_\_ (Night time) \_\_\_\_\_

Email Address : \_\_\_\_\_

Employer \_\_\_\_\_ Job Title \_\_\_\_\_ Years \_\_\_\_\_

Required USBC Card # \_\_\_\_\_

Have you ever been suspended by //ABC// //WIBC// //YABA// //USBC// ? [  ] Yes [  ] No  
If yes, have you been reinstated? \_\_\_\_\_

We are seeking individuals who have a strong desire to serve on the State Youth Board who 1) have a positive attitude, 2) will support board initiatives, 3) will promote State programs in their area, 4) will schedule time to attend board and/or committee meetings and, 5) will fulfill duties assigned by the President.

In order to evaluate your application, a general questionnaire has been included on the back side of application.

Complete the questionnaire, attain the required signature and submit to the address listed on bottom of questionnaire.

- Do you have you a working knowledge of:  
 USBC Rules and Regulations? \_\_\_\_\_ Robert's Rules of parliamentary procedures? \_\_\_\_\_  
 Will you be able to fulfill the duties assigned by the President? \_\_\_\_\_  
 Will you have the time to attend board and committee meetings to which you will assigned? \_\_\_\_\_
- Are you a board member of your Local Association? \_\_\_\_\_ Position held \_\_\_\_\_  
 Were you a volunteer working with the Local Association? \_\_\_\_\_  
 In the past year, what committees have you work on?  
 \_\_\_\_\_
- Are you an active Youth Bowling Coach? \_\_\_\_\_ Are you a Youth League Coordinator? \_\_\_\_\_  
 Are you aware of the State Youth Programs and Awards available to your youth bowlers? \_\_\_\_\_  
 Did you promote the State Tournament in your center? \_\_\_\_\_
- Why do you wish to serve on the board? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

All information contained in this application is true to the best of my knowledge and belief. I understand that any misrepresentations or omissions of any kind may result in denial or removal from office.

I hereby consent to have my name place in nomination for \_\_\_\_\_ and if elected will serve the State Association as directed by the President. Nominee must be at least 18 years of age.

\_\_\_\_\_  
 Nominee Signature Date

Recommend by: \_\_\_\_\_ Association \_\_\_\_\_  
Association Manager Telephone # \_\_\_\_\_

Mail Board Application to: State Youth Board Application  
 7435 Mockingbird Trail  
 Riverdale, Ga. 30274

Deadline for Applications close - July 10, 2010