

# GEORGIA STATE USBC YOUTH ASSOCIATION

## Board Application ~ Deadline July 7, 2012

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 a completed application for consideration.

Candidate must be a USBC member in good standing at the time of election and throughout their term; must be at least 18 years of age; must be USBC bondable; and must be RVP approved member prior to 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 \_\_\_\_\_

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

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

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

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

**Candidate must provide a copy of their USBC Membership Card and RVP Badge with their application.**

Have you ever been suspended by ABC; WIBC; YABA; USBC?     Yes     No

If yes, list any restrictions on your reinstated \_\_\_\_\_

Have you ever been convicted of a crime or pleaded no contest to any offense or violation other than minor traffic violations?     Yes     No    (Convictions are not an automatic bar from the board.)

If yes, explain 1) nature of crime, 2) date of conviction, and 3) state in which convicted. \_\_\_\_\_

*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 and policies, 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.

Candidate's Name: \_\_\_\_\_ USBC # \_\_\_\_\_ Age \_\_\_\_\_

**Complete questionnaire, attain required signature, mail to the address listed on bottom of questionnaire.**  
The signature of the Local Association Manager is not required for an incumbent seeking re-election.

- Do you have a working knowledge of USBC Rules and Regulations? \_\_\_\_\_
- Will you fulfill the duties assigned by the President? \_\_\_\_\_
- Will you have the time to attend board and committee meetings? \_\_\_\_\_
- Are you a team player? \_\_\_\_\_ Will you support board decisions and policies? \_\_\_\_\_
- Are you aware of the State Youth Programs and Awards available to your youth bowlers? \_\_\_\_\_

**Local Association information:**

- Are you a CURRENT board member of your Local Association? \_\_\_\_\_ Position held \_\_\_\_\_
- In the past year, what committees did you serve on with your Local Association?  
\_\_\_\_\_
- Are you an active Youth Bowling Coach? \_\_\_\_\_ Name of Center \_\_\_\_\_
- Name of Center Manager \_\_\_\_\_ Telephone \_\_\_\_\_
- Did you promote Youth Leader Tournaments to your youth bowlers? \_\_\_\_\_
- Did you promote the State Youth Championship Tournament in your Local Association? \_\_\_\_\_
- ❖ 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 placed in nomination for \_\_\_\_\_ and if elected will serve the State Association as directed. I also acknowledge that I will have a Fiduciary Duty to the Board, and agree to sign disclosure forms and will fully support board initiatives and policies.

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

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

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

**Postmark Deadline for Applications - July 7, 2012**