



CALIFORNIA YOUTH COMMITTEE
\$1,000 YOUTH STATE
SCHOLARSHIP APPLICATION
DEADLINE: JANUARY 15

QUALIFICATIONS

- All applicants must be current members of the California USBC Association. One-time award.
- Scholarships may be awarded each year, but not necessarily every year. At the discretion of the committee, more than one scholarship may be awarded.
- All Applicants **MUST** submit the last three years of school transcripts in order to be considered.

APPLICANT'S NAME _____ E-MAIL _____

GENDER: MALE FEMALE

ADDRESS _____ CITY _____ ZIP _____

PHONE (____) _____ USBC # _____ DATE OF BIRTH ____/____/____ AGE _____

BOWLING CENTER _____ LOCAL ASSOCIATION _____

GRADE _____ SCHOOL _____

SUBMITTED BY _____ SIGNATURE _____

ADDRESS _____ CITY _____ ZIP _____

PHONE # (____) _____ CELL # (____) _____ E-MAIL _____

COACH'S NAME _____ SIGNATURE _____

ADDRESS _____ CITY _____ ZIP _____

PHONE # (____) _____ CELL # (____) _____ E-MAIL _____

SIGNATURE OF APPLICANT _____ DATE _____

WHERE DID YOU GET THIS APP FROM? (WEB, TOURN. – LIST NAME, COACH, ETC.) _____

1. Tournament Participation (CUSBC):

- | | |
|---|------------------------------|
| A. State Championship Tournament | Number of Years _____ |
| B. Local Association Championship Tournament | Number of Years _____ |
| C. State Scratch Tournament / DW Challenge | Number of Years _____ |
| D. State Queens & Masters Tournament | Number of Years _____ |
| E. State Prince & Princess Tournament | Number of Years _____ |
| F. Pepsi Championships (Center, District or State) | Number of Years _____ |
| G. Adult Youth Scholarship Doubles | Number of Years _____ |

2. Other Certified youth tournaments. List the tournaments on an attached list and give number of years each.

3. State Participation

- | | |
|----------------------------------|------------------------------|
| A. CUSBC Meeting Delegate | Number of Years _____ |
| B. CYC Director | Number of Years _____ |
| C. CUSBC Officer/Director | Number of Years _____ |

4. Local Association Participation
- A. Local Association Officer/Director Number of Years _____
- B. Local Association Youth Leader/Youth Comm. Number of Years _____
- C. Other _____ Number of Years _____
5. Center Participation
- A. League Officer (President, VP or Secretary) Number of Years _____
- B. Youth Leader, League Level Number of Years _____
- C. Other _____ Number of Years _____
6. State Convention Attendee (Workshops, Meeting, etc) Number of Years _____
or other outside workshops, classes etc.
7. League Member
- Certified USBC Leagues Number of Years _____
- Certified USBC Sport Leagues Number of Years _____
8. League Attendance - List the last four years of participation (ex. 50%, 75%, 100% etc.)
- | | | | | |
|------------|-------|-------|-------|-------|
| Year | _____ | _____ | _____ | _____ |
| Percentage | _____ | _____ | _____ | _____ |
9. Last four years of certified averages (Winter Book Average)
- | | | | | |
|---------|-------|-------|-------|-------|
| Year | _____ | _____ | _____ | _____ |
| Average | _____ | _____ | _____ | _____ |
10. High Scores - List Highest Four in each Category with quantity (if applicable)
- | | | | | |
|------------------|-------|-------|-------|-------|
| A. 298, 299, 300 | _____ | _____ | _____ | _____ |
| B. 700 Series | _____ | _____ | _____ | _____ |
| C. 600 Series | _____ | _____ | _____ | _____ |
11. List other activities outside of bowling: Clubs, community service, school government, band, etc. Attach sheet please.
12. Enclose Letter(s) of Recommendation (minimum of two, maximum of four). This must be included in the package or the application will not be considered.
13. Enclose Applicant's Statement (Include goals and aspirations; career choices, travel etc).
14. Junior Gold Member? Yes No; If yes, what year/location did you attend Junior Gold Championships? _____
15. Are you a certified coach? Yes No; If yes, what level and how long? _____

Submit this completed application plus any applicable documents by January 15 to:

CALIFORNIA USBC
ATTN: YOUTH STATE SCHOLARSHIP
 55 Mitchell Blvd #2, San Rafael, CA 94903
 (415) 492-8880 Tel

Office Use Only: Date Received: _____