

# NEW HAMPSHIRE STATE YOUTH RAYMOND F. BOYDEN MEMORIAL \$500.00 SCHOLARSHIP APPLICATION



### **GRADUATING HIGH SCHOOL SENIOR**

#### **QUALIFICATIONS:**

- 1. Be a graduating high school senior the year of application submission.
- 2. Have sufficient academic credits to be accepted by an accredited university, community college, technical institute, or trade school.
- 3. Be an active USBC youth member currently bowling in a certified youth league within the jurisdiction of the New Hampshire State USBC Association.
- 4. Have maintained USBC youth membership and have bowled in a certified youth league within the jurisdiction of the New Hampshire State USBC Association for at least the previous two (2) years.
- 5. Complete the official scholarship application.

#### **RULES AND REGULATIONS:**

- 1. All applications must be received by the NH State USBC Association Manager by **February 15, 2015** to be considered.
- 2. All applications must be accompanied by a transcript / record, essay and three (3) letters of recommendation to include a league coach; a high school administrator, counselor or teacher; and one other individual not involved with bowling and not related to the applicant.
- 3. All applications must include verification by the local Association Manager or Center Processing Official of applicant's membership status. <a href="Note: The local Association Manager or Center Processing Official's signature">Note: The local Association Manager or Center Processing Official's signature</a> is <a href="REQUIRED">REQUIRED</a> on the statement concerning USBC Youth Membership.
- 4. Recipients may attend any institution of higher learning of their choice.
- 5. Scholarships awarded by the NH State USBC Association will be applied to tuition; however, they may be applied to books and fees if the *Board of Directors* so determines.
- 6. When the NH State USBC Association Manager has obtained verification that the scholarship recipient has been accepted at the school of his/her choice, the Manager will make arrangements for transfer of the monies to the appropriate school official. The NH State USBC Association Manager will deposit the appropriate funds in the NH State USBC SMART account in the recipient's name.

In the event a scholarship recipient is not enrolled in an accredited institution within one year from October 1 of the year the scholarship is awarded, the scholarship will be voided unless the *Board of Directors* rules otherwise. If a scholarship recipient leaves school before all funds have been used, the NH State USBC Association will request that the institution return the unused money to the USBC SMART program manager who should return it to the NH State USBC SMART account.

Scholarship may be awarded each year, but not necessarily every year.

# **RAYMOND F. BOYDEN MEMORIAL SCHOLARSHIP APPLICATION**

Co	mpl	plete the following application	n in full and include the	e following.	
Na	me	}		Gender: Male Female	
Da	ite o	of Birth:	Pho	none: ( )	
Hiç	gh S	School:			
Hiç	gh S	School Address:			
 Fa	ther	r/Guardian's Name:			<u> </u>
		r's Address:			
Mc	the	er/Guardian's Name:			
Mc	the	er's Address:			
2.	a. b. c. At Pag	nge 4). n essay (typed) from you s	, counselor, or teacher. blved with bowling and r high school academic r tating the reasons for t goals and aspirations.		ng
4.	Nu	umber of years bowled in co	ertified youth leagues	USBC ID	
	Lis	st awards, honors and invol	vement in the following	g areas (attach separate sheet if necessary):	
	a.	Bowling (league/local, state	e, national tournament)		
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# b. School c. Community 7. List other relevant experiences (work, other athletics, organizations, etc., attach separate sheet if necessary): 8. University, college, or trade school you plan to attend: 9. Planned major field of study:

RAYMOND F. BOYDEN MEMORIAL SCHOLARSHIP APPLICATION

Deadline: **February 15, 2015**Submit to: Raymond F. Boyden Memorial Scholarship 3 Westchester Drive
Nashua, NH 03063-2219
Email: cathym3west@comcast.net

## **RAYMOND F. BOYDEN MEMORIAL SCHOLARSHIP APPLICATION**

## STATEMENT CONCERNING USBC YOUTH MEMBERSHIP

I hereby certify that		is a member of the
	(applicant's name)	
	league, certified by US	BC, under the jurisdiction
of the	USBC Associat	ion, and that the applicant
	for at least the previous two years.	
,	,	
(Signature of Local USBC Association Ma	anager/Center Processing Official)	(Date)
Signature of the Local Associa	ation Manager/Center Processing	Official is REQUIRED.
	PARENTAL RELEASE	
	PARENTAL RELEASE	
As parent/guardian of		I hereby grant
	(Student's Full Name)	
	(Student's Full Name)	
permission for	(Student's Full Name)	
permission forson's/daughter's transcripts to:	(Student's Full Name)	igh School to release my
permission forson's/daughter's transcripts to:	(Student's Full Name)  H  NH State USBC	igh School to release my
permission forson's/daughter's transcripts to:	(Student's Full Name)  H  NH State USBC  ne Maloney, Association Manage	igh School to release my
permission forson's/daughter's transcripts to:	(Student's Full Name)  NH State USBC ne Maloney, Association Manage 3 Westchester Drive Nashua, NH 03063-2219	igh School to release my
permission forson's/daughter's transcripts to:  Catherin	(Student's Full Name)  NH State USBC ne Maloney, Association Managel 3 Westchester Drive Nashua, NH 03063-2219  Phone: 603.595.2330	igh School to release my
permission forson's/daughter's transcripts to:  Catherin	(Student's Full Name)  NH State USBC ne Maloney, Association Manage 3 Westchester Drive Nashua, NH 03063-2219	igh School to release my
permission forson's/daughter's transcripts to:  Catherin	(Student's Full Name)  NH State USBC ne Maloney, Association Manager 3 Westchester Drive Nashua, NH 03063-2219  Phone: 603.595.2330 il: cathym3west@comcast.net	igh School to release my

 ${\underline{\hbox{\bf Note:}}}$  The transcript must be submitted with the scholarship application submitted to NH State USBC Association.