# Arizona USBC Youth Association Boy and Girl of the Year Application

## APPLICATION MUST BE TYPEWRITTEN or LEGIBLY PRINTED

**TO BE ELIGIBLE APPLICANT MUST BE AT LEAST SOPHMORE, UP TO AGE OF 18 FOR THE CURRENT YEAR.**

**NAME CURRENT USBC certification#**

**ADDRESS CITY ZIP**

**PHONE# DATE OF BIRTH / / MALE FEMALE**

**FATHER’S NAME MOTHER’S NAME**

**ADDRESS IF NOT THE SAME \_**

**Current USBC Leagues CENTER**

**COACH’S NAME(S)**

**<><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><>**

**APPLICANT’S ESSAY (POSSIBLE 20 POINTS)**

**Please give a typed summary (at least two paragraphs-500 Minimum / 1500 maximum word) as to why you wish to be the Arizona USBC Boy/Girl of the year. What is your career goal and how do you plan to achieve this goal. Any community service that you have done and why it’s important.**

**PLEASE ATTACH BEHIND THIS PAGE**

**Upon Acceptance of this award, which includes a $2,000.00 scholarship, you will be required to attend a minimum of two**

**(2) AZ State USBC Committee meetings during your term and help run the Tournament of Champions. Your scholarship cannot be applied for until you have completed your term. The tentative AZ USBC State Youth Committee meetings will be held in the months of October, January, March, and July. See the calendar of events at** [**www.azstateusbc.org**](http://www.azstateusbc.org/)

**All four pages must be complete. You must achieve a score of 50 points to be considered for this award. Return the 4 pages plus anything additional required to your USBC Coach.**

**Parent Signature Applicant Signature**

# Arizona USBC Youth Association ARIZONA USBC BOY & GIRL OF THE YEAR

## EDUCATION BACKGROUND

### APPLICANT DATE

**<><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><>**

School Attended School

Address Address City State/Zip

Number of classes carried during the school year Fall Spring Grade Point Average School Grade

Academic Honors (List – Use additional paper if necessary)

Extra-Curricular Activities (Jr Achievement, FFA, Drama Club, Scouts, Best Buddies, etc.)

School Attendance (List number of days)

Total Number of Days Attended Excused Unexcused

Counselor or Teachers Evaluation (Use additional paper if necessary)

Counselor’s Signature

### COPY OF HIGH SCHOOL TRANSCRIPT MUST BE ATTACHED. THIS APPLICATION WILL NOT BE CONSIDERED WITHOUT GRADES.

Applicant’s Signature

**Arizona USBC YOUTH ASSOCIATION ARIZONA USBC BOY & GIRL OF THE YEAR COACH’S EVALUATION AND DATA SHEET**

### NAME DATE

**<><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><><> COACH’S NAME PHONE NO.**

**ADDRESS**

### BOWLING CENTER CITY

Complete the following questions on the Youth Applicant

USBC Member 6 years

### LEAGUE ATTENDANCE:

Number of games scheduled in league through February 1st

Number of games bowled by applicant through February 1st

1. **AVERAGE as of February 1st (Minimum of 48 games)**

If league bowls in sessions combine the two sessions (Attach bowler history)

HIGHEST GAME bowled HIGHEST SERIES bowled

1. **CERTIFIED TOURNAMENT PARTICIPATION How many years/Number**

State Tournament

**Sectionals**

**State**

Local City Tournament

Tournament of Champions

Additional Tournaments (Specify)

1. **Does Applicant coach other youth leagues? If yes many years**
2. **Tournament or League awards (use extra paper if need) See list**

**Arizona USBC YOUTH ASSOCIATION ARIZONA USBC BOY & GIRL OF THE YEAR COACH’S EVALUATION AND DATA SHEET**

### COACHES EVALUATION CONTINUED

1. **Coaching School**

Has Applicant completed Jr Olympic Gold Level 1 (CI School) Yes No

Jr Olympic Gold Level 2 (RCI School) Yes No

1. **What league offices have you held and how many years in each: President vice President** **Secretary Treasury Sergeant of Arms Team Captain**

**COACH’S COMMENT (cannot be a relative)**

(Use additional paper if necessary)

Date Signature of Coach

### ALL INFORMATION MUST BE ON SUPPLIED FORMS UNLESS OTHERWISE INDICATED. NO NEWSPRINT ARTICLES WILL BE ACCEPTED.

**ARIZONA USBC BOY & GIRL OF THE YEAR APPLICATION, EDUCATION BACKGROUND FORM, COACH’S EVALUATION, SCHOOL TRANSCIPT AND ANY ADDITIONAL PAPERS, IF NECESSARY, ARE TO BE RETURNED TO:**

NO LATER THAN DECEMBER 1st ARIZONA STATE USBC ASSOCIATION YOUTH COMMITTEE

9915 W Bell Rd # 164

Sun City, AZ 85351

azusbcawards@gmail.com