



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 or high school within the jurisdiction of the New Hampshire State USBC Association.
4. Have maintained USBC youth membership and have bowled in a certified youth league or high school 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 **March 15**, to be considered.
2. All applications must be accompanied by a transcript / record, essay and three (3) letters of recommendation to include a league or high school 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. **Note:** The local **Association Manager or Center Processing Official's signature** is **REQUIRED** 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, books and fees.
6. 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.

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Complete the following application in full and include the following.

Name _____ Gender: Male Female

Home Address: _____

Date of Birth: _____ Phone: (____) _____

High School: _____

High School Address: _____

Father/Guardian's Name: _____

Father's Address: _____

Mother/Guardian's Name: _____

Mother's Address: _____

1. Three (3) letters of recommendation from the following:
 - a. League coach.
 - b. High school administrator, counselor, or teacher.
 - c. One other person not involved with bowling and not related to applicant.

2. A transcript or record of your high school academic record (*see Parental Release Form enclosed on Page 4*).

3. An essay (typed) from you stating the reasons for the application, include the role bowling has played in your life, your goals and aspirations. You may include pertinent information not already stated on this form.

4. Number of years bowled in certified youth leagues _____ USBC ID _____

5. List awards, honors and involvement in the following areas (*attach separate sheet if necessary*):
 - a. Bowling (*league/high school/local, state, national tournament*) _____

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b. School _____

c. Community _____

6. List other relevant experiences (*work, other athletics, organizations, attach separate sheet if necessary*):

8. University, college, or trade school you plan to attend:

9. Planned major field of study:

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

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STATEMENT CONCERNING USBC YOUTH MEMBERSHIP

I hereby certify that _____ is a member of the
(applicant's name)
_____ league or high school, certified by USBC, under the jurisdiction
of the _____ USBC Association, and that the applicant
has been an active USBC youth member for at least the previous two years.

(Signature of Local USBC Association Manager/Center Processing Official)

(Date)

Signature of the Local Association Manager/Center Processing Official is REQUIRED.

PARENTAL RELEASE

As parent/guardian of _____ I hereby grant
(Student's Full Name)
permission for _____ High School to release my son's/daughter's
transcripts to:

NH State USBC
Catherine Maloney, Association Manager
3 Westchester Drive
Nashua, NH 03063-2219

Phone: 603.595.2330
Email: cathym3west@comcast.net

(Signature of Parent or Guardian)

(Date)

Note: The transcript must be submitted with the scholarship application submitted to NH State USBC Association.