Middle Georgia USBC

SCHOLARSHIP PROGRAM APPLICATION

1. _____ _____
   Full Name Street Address
2. _____ _____ _____
   City State Zip
3. (_____) _____ _____
   Area Code Telephone # SSN (used for SMART Scholarship account)
4. _____ _____
   Current USBC Youth Certification # Local Association / Division
5. How many years have you been a member of Middle Georgia USBC Youth (formerly YABA)? _____
6. Have you ever been suspended from USBC Youth (formerly YABA) Yes _____ No _____
7. List names of leagues in which you presently bowl:

   _____
8. Member of Youth Leaders? No _____ Yes _____ State _____ Local _____
   (**If YES, a letter from Youth Leader Secretary required**).
9. Are you a student coach? Yes _____ No _____ Letter required from coach.
10. Number of years you have bowled in the following Tournaments:
    State _____ Local _____ Youth Leaders _____NJBC/YBC(Pepsi) _____ Charity _____
11. Names of High School and Colleges and years attending:

    _____
12. Are you receiving other financial aid or scholarships? No ____ Yes ____ (list from where)

    _____
13. What college do you plan to enter or are now attending:

    _____
14. School activities and offices held:

    _____

    _____
15. After school jobs: _____
    Hours worked: _____

SCHOLARSHIP APPLICATION WITH ALL SUPPORTING DOCUMENTS MUST BE COMPLETED IN FULL BY THE APPLICANT AND MUST REACH THE SCHOLARSHIP CHAIRMAN OR BE DELIVERED TO YOUR BOWLING CENTER NO LATER THAN MAY 1ST OF THE YEAR SUBMITTED.