ARKANSAS STATE USBC

STAR OF TOMORROW APPLICATION

MISSION STATEMENT

The purpose of the Arkansas State USBC Star of Tomorrow award is to recognize and honor youth members of the Arkansas State USBC for their scholastic average, outstanding bowling achievements, conduct as a bowler and their service to the community.

Categories for the Star of Tomorrow will be Youth Boy and Girl.

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STAR OF TOMORROW ELIGIBILITY

- 1. To be eligible for consideration for induction into the Arkansas State USBC Star of Tomorrow, a candidate must have been a member of a certified youth program in the State of Arkansas for a minimum of three (3) years. Please note that the years do not have to be consecutive.
- 2. Must be at least a junior or senior in high school for the current season. Transcripts will be required.
- 3. Must provide a verified current twenty-one (21) game average.

INSTRUCTIONS

To submit a candidate for consideration into the Arkansas State USBC Star of Tomorrow, fill out the application form for the specific category and return to the Arkansas State USBC Hall of Fame Chairperson by April 30 of the current year. Any application received after April 30 of the current year will result in the nominee being disqualified for consideration for the current year. All applications will be reviewed by the Arkansas State USBC Hall of Fame Committee to determine completeness and eligibility. Failure to meet eligibility requirements or properly complete the application form will result in immediate disqualification.

Mail To: ASUSBC Hall of Fame Chairperson Dena Bunch 608 Maria Street Springdale, AR 72762 rdbunch1@att.net 479-466-7920

ARKANSAS STATE USBC STAR OF TOMORROW INFORMATION FORM

APPLICANT BACKGROUND INFORMATION Full Name Street Address City, State and Zip Code Alias(es); (Ex: Nickname) Date of Birth (MM/DD/YY **USBC** Membership Number (List All Associated ID#s) Gender: (Circle) Male Female Home Phone: (With Area Code) Cell Phone: (With Area Code) **Email Address** Local Association Applied Through Local Association(s) Currently Bowling Local Association(s) Previously Bowled **Parent(s) Information** Full Name Street Address City, State and Zip Code Phone: (With Area Code) E-mail Address With my signature below, I acknowledge all information presented on these forms to be true, correct, and complete. Signature of Candidate_ Date_

Please mail the application to the ASUSBC Hall of Fame Chairperson listed on cover sheet.

Arkansas State USBC

Star of Tomorrow

Youth Nomination Form

<u> Bowler Information Form Must Accompany This Form – Page 1</u>				
Name Of School	Address, City, State, Zip			
		, •	•	
Present Scholastic Grade Point Ave	rage Based on a 4.0) Scale:	Year of Graduation	
Participation In Extracurricular Activities				
	School Act	tivity		
1.				
2.				
	Community A	Activity		
1.			No. Of Hours:	
2.			No. Of Hours:	
3.			No. Of Hours:	
(Note: Please List Additional Activities On Separate Paper) Bowling Participation And Achievements				
	Current Sanction	ned Leagues	3	
1.				
2.				
3.				
4.				
5.				
Local Youth Championship Tournament				
Local Youth Championship	Best Placement		Date(s)/Year(s) Won	
Team				
Doubles				
Singles				
All Events				

State Youth Championship Tournament

State Youth Championship	Best Placement	Date(s)/Year(s) Won
Team		
Doubles		
Singles		
All Events		
	State Pepsi YBC Touri	nament
List Division	Best Placement	Date(s)/Year(s) Won
	Sectional Pepsi YBC Tou	ırnament
List Division	ist Division Best Placement Date(s)/Year(s)	Date(s)/Year(s) Won
	Arkansas Challenge Tou	rnament
List Division	Best Placement	Date(s)/Year(s) Won
Hill Rotton (Form	norly Don Hill Momorial	Scholarship Tournament
List Division	Best Placement	Date(s)/Year(s) Won
List Division	Dest Flacement	Date(s)/Tear(s) Won
	National Sponsored Tour	
	nior Gold Championship	
List Division	Best Placement	Date(s)/Year(s) Won

National Youth Championship Tournament

National Youth Championship	Best Placement	Date(s)/Year(s) Won
Team		
Doubles		
Singles		
All Events		

$Other\ Tournaments-Local/State/Regional/National$

List Tournament	Best Placement	Date(s)/Year(s) Won
1.		
2		
3		
4.		
5.		

Offices Held

League:	No. Of Years	Year(s) Served
President		
Vice-President		
Secretary		
Local Association:		
Youth Director		
Director		
Officer		
Committee		
Volunteer		
State Association:		
Youth Director		
Director		
Committee		
Volunteer		

Honors or Awards In Bowling and Other Organizations

Type of Honor or Award	Name of Bowling Organization and Other Organization		Date	
1.				
2.				
3.				
4				
5.				
Highest Game	<u> Iighest Game And</u>		Bowled	
1.				
Highest Series 1.		Year Bowled		
Years In Sanctioned Youth Bowling Number of Years In Youth Program Arkansas: Total USBC:				
	Other Informati	<u>ion</u>		
Highest Sanctioned League Average:_	Year:	Number Of	Games:	
What would it mean to you to receive	this award?			

Three Letters of Recommendation Must Accompany This Application Form