

Skagit Valley USBC Association Scholarship Application

(Rollie Gaines Memorial Scholarship)

Scholarship Application

Complete the following application in full. Include the following:

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 official record of your high school academic record
(see Parental Release Form enclosed on Page 4)
3. A letter (typed) from you stating briefly (no more than 200 words) the reason for the application. You may include pertinent information not already included on this form.
4. An essay (no more than 500 words) on any topic of your choice.

NAME: _____

ADDRESS: _____

HIGH SCHOOL: _____

ADDRESS: _____

DATE OF BIRTH: _____ PHONE: _____

FEMALE: _____ MALE: _____

FATHER'S NAME: _____

ADDRESS: _____

MOTHER'S NAME: _____

ADDRESS: _____

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1. Number of years bowled in certified youth leagues: _____

2. List awards earned in the following areas (attach separate sheet if necessary):

a. Bowling _____

b. School _____

c. Community _____

3. List offices held in the following areas:

a. Bowling _____

b. School _____

c. Community _____

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

5. Planned major field of study: _____

I hereby submit this application to be considered for a scholarship under the Skagit Valley USBC Association Scholarship Program. I certify that I am a high school graduating senior.

Signature of Applicant

Date

Signature of Parent or Guardian

Date

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Scholarship Program Guidelines

1. A Scholarship Committee shall be responsible for the administration of the Scholarship Program including the selection of the scholarship recipient subject to the rules and regulations as specified by the Board of Directors of the Skagit Valley USBC Association.
(2) scholarships in the amount of \$250.00 each will be awarded to (1) male and (1) female recipient annually.

2. The Scholarship Committee shall consist of four members who shall be determined by the Youth Committee and approved by the Board of Directors.

3. QUALIFICATIONS - Applicant must:
 - Be a graduating high school senior the year of application submission.
 - Have sufficient academic credits to be accepted by an accredited university, community college, technical institute, or trade school.
 - Be an active USBC youth member, currently bowling in a sanctioned youth league at Riverside Lanes, San Juan Lanes, Oak Bowl, or Paradise Lanes.
 - Have been a USBC youth member for at least the previous two (2) years.
 - Have resided within the jurisdiction of the Skagit Valley USBC Association for at least the previous two (2) years.
 - Complete the official scholarship application.

RULES AND REGULATIONS

1. All applications must be received by the Skagit Valley USBC Association Scholarship Committee no later than April 15th of the current year to be considered.

2. All applications must be accompanied by 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 Skagit Valley USBC Association Manager of applicant's membership status.

4. Any incomplete or late applications may be disqualified from consideration.

5. Scholarships awarded by the Skagit Valley USBC Association will be credited to the recipient's SMART accounts.

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STATEMENT CONCERNING USBC YOUTH MEMBERSHIP

I hereby certify that _____ is a member of the _____ league, certified by USBC, under the jurisdiction of the Skagit Valley USBC Association, and that the applicant has been an active USBC youth member for at least the previous two years.

Signature of Skagit Valley USBC Association Manager

Date: _____

Forward completed application forms by **April 15th** of current year to:
Skagit Valley USBC Association
Attn: Scholarship Committee
P.O. Box 1258
Burlington, WA 98233

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PARENTAL RELEASE

As parent/guardian of _____
(Student's Full Name)

I hereby grant permission for _____
HIGH SCHOOL to release my son's/daughter's transcripts to:

Skagit Valley USBC
Attn: Scholarship Committee
P.O. Box 1258
Burlington, WA 98233

E-mail: skagitvalleyusbc@gmail.com

(Signature of Parent or Guardian) (Date)