



OHIO STATE USBC

QUALIFICATIONS OF PROSPECTIVE CANDIDATES

Please complete this application in its entirety and return by the deadline of February 1.
Incomplete applications may not be considered by the Nominating Committee.

YOU MUST BE A MEMBER OF THE USBC REGISTERED VOLUNTEER PROGRAM AND SUCCESSFULLY PASS THE SAFESPORT TRAINING TO BE CONSIDERED AS A PROSPECTIVE CANDIDATE.

Do you have the capability to participate in Zoom communication? () Yes () No
Please be advised Zoom communication may be a requirement for board service.

Name: _____ USBC # _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Current Local Association: _____

Candidate for the office of:

() First Vice President

() Director # 4

() Director # 7

() USBC National Convention Delegate (2 delegates and 2 alternates to be elected)

Would you be willing to be put on the slate in a different position, other than the position indicated above, if the Nominating Committee feels your credentials would be better suited for another position? () YES () NO

If additional space is required, please use other side, or submit attachment.

Member of: (List all leagues and local associations)

Offices Held: (List all offices held – State, Local or League, and specify years)

Present:

Past:

Committee Experience: (List all committee experience, indicate if Chair – State, Local or League, and specify years)

List attendance information: (State and/or Local meetings and/or workshops, and specify years)

List any contributions you have made or awards you have received in the sport of bowling:

List any education, training, knowledge or skills you have which would be significant/relevant to this position:

If employed, list employer, position and length of service:

Indicate why you are applying for this position, and your vision for the Ohio State USBC:

Are you currently enrolled in the USBC Registered Volunteer Program? YES NO

List any additional information you deem relevant which the Nominating Committee should consider:

I certify all information contained in this application is true and accurate to the best of my knowledge and belief. I understand that misrepresentation may result in denial of my application.

Signature: _____

Date: _____

Please submit your completed application, no later than February 1, to any of the following.

Ohio State USBC Nominating Committee

Becky Hoffer
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