



APPENDIX D – STAR OF TOMORROW SCHOLARSHIP AWARD APPLICATION

This Application Must be Typed
No Handwritten Responses Accepted (Required for Accuracy)

To be completed by Parent, Guardian or Applicant
Scholarship Amount of \$2000 Awarded to One Girl and Boy Yearly

Name of Student: _____ M / F (Please Circle)

Address _____
(Street) (City) (State) (Zip)

Telephone _____ Date of Birth: _____

USBC Membership ID: _____ (Must be current PA State Youth USBC member)

Do you plan to attend college? _____ If so, where? _____

Father's/Guardian's Full Name: _____

Address _____
(Street) (City) (State) (Zip)

Mother's/Guardian's Full Name: _____

Address _____
(Street) (City) (State) (Zip)

IF I AM SELECTED TO RECEIVE THIS SCHOLARSHIP, I HEREBY AFFIRM THE FOLLOWING: The scholarship policy of the Pennsylvania State USBC Youth Association shall govern the use of this scholarship. The scholarship policy can be found on our web site. A copy will be provided to all recipients.

I/WE hereby certify that I/WE have completed this scholarship application intending that the Pennsylvania State USBC Youth Association will rely on the information contained therein in awarding scholarship(s). I/We certify that all of the information contained in this application is true and correct based upon my/our knowledge, information, and belief. By my/our signature(s) below, I /We reaffirm the accuracy of the information presented, and in making this affirmation, I/We understand that any false statements herein are made subject to the penalties of 18 Pa.C.S.A. Section 4904.

Signature of Applicant: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

Please mail the completed application, including this certification page, and all required documents to:

Robin Marshall, Director
68 Ferry Lane
Phoenixville, PA 19460-2602
(610) 935-2871
rmarshall@bowlpa.org

A copy of this completed application and additional required documentation must be postmarked no earlier than February 1st and no later than April 15th for consideration.

A completed sample of this application can be found on BOWLPA.ORG



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Additional Documents Required: Current High School/College Report Card or Transcript showing current GPA and Class Rank.

Academic Accomplishments (9th Grade and Above Only)

Name of High School/College: _____
(Must be attending High School or College to be eligible for this award)

Grade Point Average: _____ (Min. of 2.0 required, report card or transcript required)

List any honor and/or AP classes (these are classes that receive a weighted GPA)

<u>Honor/AP Class</u>	<u>Grade Levels Taken</u>

List any school activities, non-sports related that you are active in and list any accomplishments:

<u>School Activity</u>	<u>Accomplishment</u>	<u>Grade Level Involved</u>

List any school sports you are involved in if any and list any accomplishments:

<u>School Sport</u>	<u>Accomplishment</u>	<u>Grade Level Involved</u>



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Non- Academic Accomplishments (9th Grade and Above Only)

List any activities you are involved with outside of school.

<u>Non School Activity</u>	<u>Accomplishment</u>	<u>Grade Level Involved</u>

List any volunteer work or community service you are involved with outside of school.

<u>Volunteer/Community Service</u>	<u>Accomplishment</u>	<u>Grade Level Involved</u>	<u>Total Hours/Year</u>

List any sports you are involved in outside of school and list any accomplishments:

<u>Non School Sport</u>	<u>Accomplishment</u>	<u>Grade Level Involved</u>

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Essay question to be completed in 500 words or less: (Please type your answer on a separate document and attach to this application. Also place the question at the top of your answer.)

How has Youth Bowling benefitted you?

Bonus Essay question to be completed in 500 words or less: (Please type your answer on a separate document and attach to this application. Also place the question at the top of your answer.)

If you could change something in Youth Bowling, what would it be, why, and how would you implement that change?

Letters of Recommendation – Two required, one must be from a bowling coach.

Please attach two letters of recommendation to this application, both must be typed, handwritten letters are not acceptable. Letters must contain the information requested below:

Why do you feel this person should receive this scholarship?

Letter must contain the signature and printed name of the person writing the letter as well as an email, phone or both in the event we need clarification of to verify some information provided.