## **Application for Michigan State USBC Board - Please type or print clearly.** (All areas must be completed, if not applicable indicate with NA) - please attach additional information if needed)

Name Certification Number			
Address	CityZip		
Primary Phone	Secondary Phone		
Email			
Position(s) I wish to be considered for			
Would you consider another position if the nominating c it? Please note: Officers must have previously served			
Are you currently a USBC Registered Volunteer (RVI USBC rules require all officers and boar	P) If not, are you willing to become one? rd members to be SafeSport and RVP certified		
Have you been convicted of a felony?			
Per USBC rules, individuals who have been convid	cted of a felony may not run for a position on a Board.		
Have you ever been suspended from ABC/WIBC/YA	BA or USBC?		
If yes, please explain:			
Do you have a working knowledge of USBC Rules &	Procedures?		
Do you have a working knowledge of Robert's Rule o	f Order?		
If elected, will you dedicate time to at least three boa and work the tournaments, annual meeting, and bas	ard meetings per year, committee meetings as required nquet?		
Are you a yearlong resident of the State of Michigan?	2		
Resume of your activities in USBC programs (Attach	additional sheet if needed)		
STATE LEVEL: Total number of years active:			
Positions held:			
Present:			
Past:			
Committees Served:			

LOCAL LEVEL: Total nur	mber of years active		
Positions Held:			
Present:			
Past:			
Committees Served:			
		Total Namban of mount	
National Annual meeting			<b>X</b> 7 (1
		WBA	_ Youth
-		ended: Total number of years:	
USBC	BA	WBA	Youth
May attach additional sh	eet if needed to outlin	e coaching career.	
Total number of years ac	tive Cente	rs:	
Coaching Level:			
I have the ability to perform	the leadership function	as of the Michigan State USBC Boar	rd (yes or no)
I have the ability to perform	all duties and responsi	bilities of my position in an unbias	ed manner (yes or no)
I have the ability to get alor	ng and work well with ot	hers (yes or no)	
		ational background, work histor in explanation as to why you wi	y, special skills, and any honors sh to run for the state board.
I certify all above stateme	ents are true		Date
		(Candidates Signature)	
Reference: (For New Can	didate's Only)		
Reference (an individual service of bowling)	who has knowledge of	f the candidate's history and pa	st/present performances in the
Reference Contact informat	ion:		
Name		Email	
Address	City	Zip	Phone
Instructions: Must be subn	nitted to the Nominating	g Chair no later than May 10, 2025	
Mail to:			
Cherylle Secl-Cross- Non	unating Chair	Committee Membe	rs:
2405-A Porter, SW Grand Rapids, MI 49519		Marti Boron Randy Ryefield	
616-530-8195		κατιών κλετισια	
Or email to: <u>cherylles@g</u>	rgrusbc.org		