Scholarship Application Instructions

Please follow the below instructions when filling out the application forms:

- 1. Form #1 is to be completed by the applicant. Make sure to include a 250 word essay (does NOT include the title of the essay) on "What Bowling Means to Me" and sign and date form.
- 2. Form #2 is to be completed by your bowling coach. The form should be signed and dated and placed in a sealed envelope. Comments from the coach will receive extra consideration.
- 3. Form #3 is to be completed by a high school staff member or high school counselor. A copy of your high school transcript is mandatory. Letters of recommendation are optional. ALL letters will receive extra consideration. Form should be signed and dated and placed in a sealed envelope.
- 4. All forms need to be collected and submitted by the applicant in one envelope and postmarked no later than March 15th.

Send application forms to:

Milwaukee Area USBC 2514 S 102nd St, Suite 210 West Allis, WI 53227

	Milwaukee Area USBC Scholarship Application Form #1 Applicants Personal Data Must be a member of the Milwaukee Area USBC and a graduating high school senior				
1.	Applicant's Name	_ Member ID #			
2.	Home Address				
3.	Phone Age Da	te of Birth			
4.	Parent / Guardian Name				
5.	Name of High School	_ Date of graduation			
6.	Address of School				
7.	College / Institution you plan to attend				
8.	Course of study				
9.	List any honors, awards and other special recognition you have received in high school				

10. List all high	school activities	and number	of vears	participated

olunteer service w sor(s) name)	ork that you partion	cipated in during	high school (include	hours and

12. Enclose an essay of 250 words or more (does NOT include the title) on the following topic "What Bowling Means to me" (**If more room is needed, please use reverse side or attach another sheet of paper**)

Milwaukee Area USBC Scholarship Application Form #2 To be completed by Coach

1.	Applicant's Name	Member ID #
2.	Name of league currently bowling	
3.	Number of years USBC Member	_
4.	Number of Local, State or other tournaments	
5.	List any involvement in coaching, helping wit	
Coach	es Name(please p	rint)
	(piease pi	иц <i>ј</i>
Signat	ure	Date

Milwaukee Area USBC Scholarship Application Form #3 To be completed by High School Staff member or High School Counselor

Applicant's Name	Member ID #	Member ID #	
o the person filling out this form. The above applicant is applying for a Milwaukee Area USBC Schola formation is confidential.		Scholarship. All	
Name of high school			
Address of school(Street)	(City)	(Zip)	
Person filling out this form	t your name)		
Address(Street)	(City)	(Zip)	
Composite National Standard Score : ACT	SAT		
Cumulative grade point average for seven semeste	rs		
Personality record			
Additional comments that would be helpful in evaluation	ation		
(Letters from counselors, teachers, administrators, etc. will be	given extra consideration.)		
Please attach a transcript copy of grades.			
Signature	Date		

Title _____