



**COLORADO STATE USBC
BOARD OF DIRECTORS/OFFICER APPLICATION**

Applications must be submitted by March 31, 2021 to
Sandra Eckert
2420 West Mulberry Street
Fort Collins, CO 80521
jselbo@comcast.net

ELIGIBILITY REQUIREMENTS:

1. All candidates must be members in good standing of USBC and their local association at the time of election and remain in good standing throughout their term.
2. A candidate for an officer position must have served on a state board for a minimum of 3 years.

POSITION FOR WHICH YOU ARE SEEKING ELECTION: _____

APPLICANT INFORMATION:

Name (Last): _____ (First, Middle): _____

Street Address: _____ Phone (Day): _____

City/State: _____ Phone (Evening): _____

Zip Code: _____ USBC Member Number: _____ Phone (Cell): _____

Home Email Address: _____ Work Email Address: _____

Name of Local Association _____ Are you under 18 years of age? Yes () No ()

QUALIFICATIONS – Please complete the following, beginning with the current season and work back. If additional space is needed, a separate sheet may be attached.

PRESENT: Colorado State USBC Position Held: _____ Number of years: _____

Colorado State USBC Position Held: _____ Number of years: _____

Colorado State USBC Committees: _____

Local Association Position(s) Held: _____ Number of years: _____

Local Association Position(s) Held: _____ Number of years: _____

Local Association Committees: _____

League Position(s) Held: _____ Number of years: _____

CO State USBC Youth Participation: _____

PAST: USBC/WIBC/ABC Position(s) Held: _____ Number of years: _____

USBC/WIBC/ABC Position(s) Held: _____ Number of years: _____

USBC/WIBC/ABC Committees: _____ Number of years: _____

Colorado USBC/CWBA/CSBA Position(s) Held: _____ Number of years: _____
_____ Number of years: _____

Colorado USBC/CWBA/CSBA Committees: _____

Local Association Position(s) Held: _____ Number of years: _____
_____ Number of years: _____
_____ Number of years: _____

Local Association Committees: _____

League Position(s) Held: _____ Number of years: _____
_____ Number of years: _____

CO USBC Youth/YABA Participation: _____ Number of years: _____

Special Appointments: _____ Year: _____

Honors: _____ Year: _____

CURRENT AND PAST:

Have you attended a USBC Leadership Training Seminar or equivalent program? Yes () No ()

If so, please explain: _____

Number of Colorado State USBC annual meetings attended since 2007 _____

Number of Colorado State Workshops attended: _____

Number of USBC/ABC/WIBC Meetings/Conventions at which you served as a Delegate: _____

Number of Colorado State BA/WBA/YOUTH Annual Meetings attended prior to 2007 _____

Number of Colorado State Annual Tournaments in which you have participated: _____

Number of Local Association Tournaments in which you have participated: _____

What is your vision for the Colorado State USBC Association? _____

Goals are important in any organization. What do you see as the Colorado State USBC association's primary goal and how would you address it? _____

The USBC has a Registered Volunteer Program which accomplishes a background check on all USBC volunteers. As a Board Member you must participate in this program.

Elected officers and directors are expected to attend all Colorado State USBC association board meetings, committee meetings, participate in workshops and assist when needed. If you are elected to the Colorado State USBC Board of Directors, will you be able to give the necessary time for these functions? Yes ()
No ()

PLEASE READ CAREFULLY BEFORE SIGNING THIS FORM

All information contained in this application is true to the best of my knowledge and belief. I understand that misrepresentations or omission of any kind may result in denial of position consideration. I authorize this association to investigate my responses on this application.

If I am elected to an office with the Colorado State USBC bowling association Board of Directors, I will faithfully fulfill the duties of the office to which I am elected to the best of my ability and will make every effort to bring honor and credit to the Colorado State USBC bowling association.

Signature: _____ **Date:** _____

This application will be reviewed and evaluated by the Nominating Committee.

Thank you for your interest in the Colorado State USBC Association