FLORIDA STATE UNITED STATES BOWLING CONGRESS



CANDIDATE APPLICATION	J
Please type or print clearly in black ink	

USBC

Please type or print clearly in black ink	
All questions must be answered as completely as possible	

	in questions must be ans	1 2 1		
Name:				
Address:				
City, State & Zip:				
Day Phone:				
Evening Phone:				
Cell Phone:				
E-mail Address:				
Association:				
USBC Nat'l. ID #:				
		DN SEEKING		
President		<mark>irector Sgtat-Arms</mark> e One	National Delegate or Al	ternate
	nsider being recommended, for a position other than the o	by the Nominating	Yes No	
	Please list all positions held, committe	FION HISTORY ees served on and number of years ser n/Committee	ved on each # of Yrs.	
State Association:				
				- -
	D. V.			
LOCAL:	Position	n/Committee	# of Yrs.	•
			<u> </u>	

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	Position/Committee	# of Yrs.	
LEAGUES:			
	Position/Committee	# of Yrs.	
NATIONAL:	I OSRIGI/Committee	π 01 113.	
11/11/10/11/11.			
OTHER ORGANIZATIONS			
& AFFILIATIONS:			
		_	
HONORS:			
Employment:			
Position Held:			
Job Responsibilities:			
Length of Employment:			
Organizations & Titles:			
č			
List all associations (state/loc) t	hat the above pertain to	May we contact	
		this association? (Y) No	
Association Name:	[
Address/City/St/Zip:			
		(Y) No	
Association Name:			
Address/City/St/Zip:			
		Y No	
Association Name:			
Address/City/St/Zip:			

ELIGIBILITY

- 1. To be eligible for nomination to the board of directors, applicants MUST be a member in good standing of USBC and a local
- USBC association within the State of Florida <u>at the time of submission of this application</u> and throughout their term in office. 2. Successful applicants must either have, or upon election, obtain and maintain approved USBC Registered Volunteer and t Training Certified 0.0

Safesport Train	ning Certified status.				
 A working know Been continuous Been continuous Leag Assoc Assoc Annu The time to trav Will you, unless 	sly active in your local gue participation? viation meeting attend ual association tourna vel for planned assign providentially hindere	es of Parliamentary Proced l association? ance?	en meetings		
LEADERSHIP CODE OF	ETHICS As	a member of this board, I w	ill:		
use my service of Keep confidenti Approach all bo nothing to viola Focus my effort	on this board for my o al information confide bard issues with an ope te the trust of those wh ts on the mission of the	wn personal advantage or fo ntial. n mind, prepared to make th ho elected or appointed me t e association and not on my	r the advantage of my f e best decisions for ever o the board or of those y personal goals.	yone involved. Do	
	Signature			Date consent to have my name	
All information cont understand that miss from office (whichev necessary to serve as	representations o ver is applicable)	. I have read, underst e Florida State USBC	ind may result in a tand and agree to	denial or removal the requirements	
	(Must be signed, NC			Date	
not on the application.				Board? Tell us something about yoursel <i>MITTEE MEMBERS LISTED BELOW</i> .	f
I LEASE COMI LETE II					
	ТО:	Glenda Beckett Michael Greene Ashley Chisano FS-USBC	gbeckett@bellsouth. mkgre41284@hotma ashleychisano8@gm floridastateusbc@gm	il.com ail.com	
IF EMAIL IS NOT AVAL	LABLE, PLEASE M	AIL THE APPLICATION	TO THE ADDRESS I	ISTED BELOW:	
	TO:	Glenda Beckett 16661 SW 84 th CT Palmetto Bay, FL 3	3157		
DEADLINE .	. POSTMA	RKED NO LATEI	R THAN **IIII	Y 31st**	