

Rochester NY USBC, Inc.

Resume Form for Potential Candidates for Board of Directors

Candidates seeking nomination to the Rochester NY USBC Board of Directors must complete this form and send a copy to the attention of Dena Alberti, Nominating Committee Chair, by **March 5, 2020**, to the Rochester NY USBC, 745 Titus Ave. Annex Bldg., Rochester, NY 14617 or e-mail to skins4ever1@aol.com.

By submission of this Form, a Candidate is expected to attend:

- Board of Directors' Meetings.
- Annual Association Meeting.
- Committee meetings as called.
- Other bowling functions and additional duties as deemed necessary by the President.

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Complete this form in full. Please type or print the information clearly.

Check desirable position.

Adult Director ___ **Youth Director** ___

Name _____ Telephone (Home) _____

Street _____ (Work) _____ (Cell) _____

City/Zip Code _____ E-mail _____

Current USBC Membership # _____ Number of Years USBC Member _____

Number of Leagues of which you are an active member _____

Are you a member of any uncertified leagues? ___ No ___ Yes

Are you a member of the Registered Volunteer Program (RVP)? ___ Yes No ___

(Note: If elected to the Board of Directors, this is a requirement by USBC. Visit bowl.com for more info.)

What experience, talents, skills, and/or abilities do you bring that would benefit the Rochester NY USBC Board of Directors?

By my signature, I hereby confirm all information is correct and consent to have my name placed in nomination for the Position of _____ and agree to serve, if elected.

(Signature)

Name of Applicant _____

What bowling and non-bowling, civic, fraternal, social, professional, technical, or other organization are you a Member, Officer, or Director? Indicate:

- Any positions held.
- Honors and awards.
- Dates of service/contributions/awards.

Sell Yourself...and tell us why you want to serve on the Board of Directors:

References: (Other than relatives; include contact information)

Employment: (Past and/or Present)

Name of Firm _____ Position Held _____

Length of Employment _____ Responsibilities _____

Use space below or an additional page, if required.