

**TEXAS STATE USBC ASSOCIATION  
CANDIDATE FORM –BOARD OF DIRECTORS**

New Candidate \_\_\_\_\_ Incumbent \_\_\_\_\_

Position \_\_\_\_\_

Name \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code \_\_\_\_\_ Home ( \_\_\_\_\_ ) Work ( \_\_\_\_\_ )

email: \_\_\_\_\_

Member of Local Bowling Association: \_\_\_\_\_ Are you a member of the local board? \_\_\_\_\_ Position \_\_\_\_\_

**LIST ALL OFFICES/COMMITTEES: INDICATE PAST OR PRESENT, THE NUMBER OF YEARS SERVED**

**STATE:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LOCAL:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OTHER AFFILIATIONS RELATED TO BOWLING: List all offices held, if any, together with number of years and indicate whether currently serving or past.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LIST PERSONAL CONTRIBUTIONS TO THE GAME OF AND PROMOTION OF BOWLING:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**HONORS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT:** \_\_\_\_\_

The Nominating Committee needs your cooperation in securing the best possible nominees for Texas State USBC Association Officers and Directors. Much consideration should be given to a prospective officer's ability and willingness to serve, before her name is placed in nomination. Please complete the following important information:

Nominee has and/or is:

1. A member in good standing of the association at the time of election and through out their term.
2. The minimum age of 14, unless state laws mandate a specific age.
3. Served as a delegate at least two years within a consecutive five year period? \_\_\_\_\_
4. A working knowledge of USBC rules and regulations? \_\_\_\_\_
5. A working knowledge of Robert's Rules of Parliamentary Procedure? \_\_\_\_\_
6. Been continuously active in the Local Association? \_\_\_\_\_ How long? \_\_\_\_\_
7. The ability to perform all functions of the office on an unbiased overall basis? \_\_\_\_\_
8. The ability to perform all functions of leadership required of the position? \_\_\_\_\_
9. The ability to take time off from work or business to perform duties of the position? \_\_\_\_\_
10. The ability to present a professional imagine and attitude in the position? \_\_\_\_\_
11. Been contacted by you? \_\_\_\_\_ Did they agree to serve, if elected? \_\_\_\_\_

Please complete and mail Texas State USBC: Kay Smith, 4569 Dilly Shaw Tap Rd, Bryan, TX 77808

**DEADLINE: January 1, 2020**

Submitted by: \_\_\_\_\_

Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Telephone (Home)

\_\_\_\_\_  
(Work)

\_\_\_\_\_  
Candidate Signature

\_\_\_\_\_  
Local Association