

**Palm Beach County USBC  
Scholarship Application  
All Applicants must be USBC members**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Male/Female \_\_\_\_\_

**Personal and Family Statistics**

High School you attend \_\_\_\_\_

College/Trade School you will attend \_\_\_\_\_

Have you applied? \_\_\_\_\_ Been Accepted \_\_\_\_\_

Have you received any other financial aide? \_\_\_\_\_

Please Explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of dependents in family \_\_\_\_\_ Dependents in College \_\_\_\_\_

Do you have a part time job? \_\_\_\_\_

List your previous jobs and length of  
employment \_\_\_\_\_

\_\_\_\_\_

If this scholarship money is not used within one year, the applicant must re-apply.

Send application to Palm Beach County USBC  
3951 Haverhill Road, West Palm Beach Florida 33417

## Academic Statistics

This information must be supplied from the schools attended:

- Transcript of grades
- ACT or SAT scores
- Grade Point Average

Also include:

- School clubs or offices held
- High school sports
- Report from high school advisor or teacher
- Report from bowling coach

## Bowling Statistics

Number of years bowling in Palm Beach County

Highest Yearbook Average

\_\_\_\_\_

Highest Game

\_\_\_\_\_

Highest Series

\_\_\_\_\_

Officer of bowling Leagues

YES

NO

\_\_\_\_\_

\_\_\_\_\_

Member of the Palm Beach Count Youth Leaders

\_\_\_\_\_

\_\_\_\_\_

Bowled in the county Tournament

\_\_\_\_\_

\_\_\_\_\_

Bowled in the state Tournament

\_\_\_\_\_

\_\_\_\_\_

Brief list of other tournaments:

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

In addition to the reports listed, please attach a letter of recommendation from a source unrelated to bowling or school.

I understand the information on this and other pages will be held in confidence, although it may be necessary to disclose grades, test scores, or any other data to responsible parties before a scholarship recipient may finally be determined. I hereby give my permission to release this information when necessary.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Parent or guardian signature \_\_\_\_\_ Date \_\_\_\_\_