



# Mabel Marrs Star of the Future Or Ray Wise Memorial Scholarship

Application due no later than June 1<sup>st</sup> of Current Season

FEMALE \_\_\_\_\_ MALE \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

USBC # \_\_\_\_\_ Grade in School \_\_\_\_\_ Age began bowling \_\_\_\_\_

Address \_\_\_\_\_ Student High School \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Local Youth Association \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Employer (if any) \_\_\_\_\_

## HIGH LEAGUE AVERAGES FOR THE LAST THREE YEARS

YEAR \_\_\_\_\_

YEAR \_\_\_\_\_

YEAR \_\_\_\_\_

AVERAGE \_\_\_\_\_

AVERAGE \_\_\_\_\_

AVERAGE \_\_\_\_\_

## HIGHEST SERIES AND GAMES BOWLED

GAME \_\_\_\_\_

GAME \_\_\_\_\_

GAME \_\_\_\_\_

SERIES \_\_\_\_\_

SERIES \_\_\_\_\_

SERIES \_\_\_\_\_

IF POSSIBLE - DO A YEAR BY YEAR ACHIEVEMENT SUMMARY  
(Local/State/Regional etc. - all achievements)

	<u>Year</u>	<u>Score</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

OTHER SPECIAL BOWLING AWARDS OR HONORS

	<u>YEAR</u>
_____	_____
_____	_____
_____	_____
_____	_____

SPECIAL AWARDS OTHER THAN BOWLING

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

FUTURE EDUCATIONAL PLANS AND GOALS

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HOBBIES/COMMUNITY SERVICE

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ESSAY QUESTION

What does bowling mean to you?

It is not necessary to have qualified in all areas. For additional information, please attach a separate sheet.

Endorsed by Coach or another Adult Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Date \_\_\_\_\_

SCHOLASTIC INFORMATION

**Please include copy of most recent academic report (Report Card)**

**If applicant is under the age of 18, this form must be signed by a parent or legal guardian:**

Name of parent or legal guardian \_\_\_\_\_

Signature of parent of legal guardian \_\_\_\_\_

Will you allow the OSUSBC to post your child's name/likeness to our website or facebook page should they be the Recipient of this award? YES \_\_\_\_\_ NO \_\_\_\_\_

Send Applications to Recognition Committee  
Oregon State USBC  
PO Box 309  
Oregon City, OR 97045

Email recognition@osusbc.com