Scholarship Check List

Guidance Counselor's Verification/Signature	
Coaches Signature/League Official	-
Applicant's Signature	
Parent's Signature	
Letters of Recommendation Needed:	
Bowling Coach	
Teacher/ Counselor (min. of 1)	-
Community Service	
Please return worksheet with application	

Sheet initialed by Applicant _____

Sheet initialed by Scholarship Chair ____

Date received:

Emma P. Hendrickson & Charles A. Edwards Scholarship Awards Application

The Emma P. Hendrickson and Charles A. Edwards Scholarship Awards are sponsored by the Morris County NJ USBC AND IS A BOWLING BASED SCHOLARSHIP.

Eligibility: Applicants must be a Junior or Senior in high school AND be a current certified/sanctioned member of the Morris County NJ USBC for a minimum of three (3)) years. He / She must have compiled a Morris County NJ USBC certified bowling record, Morris County tournament participation, solid scholastic aptitude and school and/or community involvement. The recipient cannot have competed at any time in a professional bowling tournament (this does not preclude competition as an amateur in a Pro-Am) Previous recipients of this scholarship are not eligible to apply. We will award \$ 1.000.00 for the Emma P. Hendrickson to a female bowler and \$1,000.00 for the Charles A. Edwards to a male bowler. (This can be changed if only all male or all female applicants apply.

Please fill this form out completely and submit to MC NJ USBC Scholarship Committee by April 15 th

PLEASE TYPE OR PRINT LEGIBLY

		PERSONAL	_ <u>-</u>		
Las	t Name	First Name	MI	Date of Birth	USBC ID#
Stre	eet Address		City	State	z Zip
			# of ye	ears certified/sanction	ned in MC NJ USBC
Tele	ephone number	(n	ninimum of 3	years to be eligible	for scholarship)
		SCHOOL & COM			
<u>I</u>	EDUCATION /	SCHOOL & COM	IMUNITY	/ INVOLVEM	<u>ENT</u>
<u>H</u> igh S		SCHOOL & COM	IMUNITY	/ INVOLVEM	ENT ty & Zip Code
High S	EDUCATION / School Name G.P.A.:	SCHOOL & COM School Address Guidance Counsel	IMUNITY s	Y INVOLVEM Ci	ENT ty & Zip Code
High S Grade: Scholastic Ho	EDUCATION / School Name G.P.A.: onors: Please list for al	SCHOOL & COM School Address Guidance Counsel	IMUNITY s	Y INVOLVEM Ci	ENT ty & Zip Code
High S Grade: Scholastic Ho	EDUCATION / School Name G.P.A.: onors: Please list for all	SCHOOL & COM School Address Guidance Counsel	IMUNITY s	Y INVOLVEM Ci	ENT ty & Zip Code
High S Grade: Scholastic Ho	School Name G.P.A.: onors: Please list for all	SCHOOL & COM School Address Guidance Counsel ll years	IMUNITY s	Y INVOLVEM Ci	ENT ty & Zip Code

			ITTEN DOCUMENTATION AND
SIGNED BY A	N OFFICIAL)		
*			
BOWLING HIS	STORY – Scholarship	is not solely based on b	owling achievements
Highest certified	d average (can be ver	ified on Bowl.com)	
List highest ave	rages for each of you	r last 3 seasons in Morris	s County,
	E-L-Auto-		
	_	-	years Bel Pike, Boonton Lanes, Rockaway Lanes, Sparta Lanes
	, 1, 1 2	, our 100 a 2 and 0	
Name of all leag	gues you participated	in:	
			in a certified/sanctioned league:
			date:
			date:
Game:	date:	Series:	date:
Participation is overall tournam		USBC Tournaments li	sted: Minimum participation of at least 2
<i>Emma P. Hend</i> Qualifier		h Qualifier and/or Roll-e off (Super Bowl Sunday)	off: Center bowled in for
		How many yea	

:

Edith A. Kinney	Annual Champio	nship Tournament:	Teams, Doubles and Singles events
Years bowled:	Place finish	ed (if award winner)	Event
		Finish:	
All other State, N	Vational Junior (Gold, Teen Masters,	Pepsi tournaments bowled in: List years,
levels, titles, etc.			

www.			•
NJSIAA Particip	ation and Achie	<u>vements –</u> Above and	l beyond NJAC North and NJAC South
		in include but not lim	
			titles achieved as an individual or team:
		, F	series women ou as an analytication of teams.
			-
The second secon			
		, s	
		-	
List of any other b	owling involvem	ent (organizations, le	ague offices held, special awards, etc.
-			

Applicant's Narrative – Please limit to one or two short paragraphs

Please state, in your own words, why you feel y would get other youth bowlers interested in the		
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Please attach additional information you feel su be sent with your application (one recommenda from a teacher and/or counselor) PLEASE SEE	ation MUST BE from a bowling	g coach and the other_two
Coach/ League Official's Signature	Current Average	Date Signed
Parent/Guardian's Signature	Applicant's Signatu	re .
*** All signatures must be present for applica	tion to be considered	
fail or Email completed application POSTMA	ARKED no later than April 15th	to:
Mrs. Vicky J. Dodd 109 W I	Lakeview Road, Newton, Ne	w Jersey 07860
Email address: r	nanavjd97@gmail.com	