



Donald M Roberts

Stars of

Fomorrow



OPEN TO ALL NEW JERSEY

HIGH SCHOOL SENIORS

GIRLS & BOYS

USBC CERTIFIED FOR 3 YEARS

New Jersey State USBC Scholarship Program



New Jersey State USBC Scholarship Program Shirlee Kutzner & Donald M Roberts Stars of Tomorrow



The New Jersey USBC will award a minimum 4 Scholarships The Scholarship Committee reserves all rights on these decisions

- ✓ Applicants must be a New Jersey High School Senior, graduating in the current year.
- ✓ Applicants must be Certified NJ USBC Youth Bowler for 3 years and a minimum 21 games bowled in each year.
- ✓ Applicants must not be bowling in an adult league.
- ✓ Applicants must be planning to further their education to an accredited Universities, Colleges, Business Schools, Technical, Trade and or Vocational Schools.
- ✓ Applicants must provide 2 letters of reference, with at least one from a Bowling Coach or Bowling Instructor.
- ✓ Applicants must include a copy of their High School Transcript, signed by your Guidance Counselor.
- ✓ Applicants must submit an essay of 200 words or more with application giving your reasons for applying for our scholarship,
- ✓ Applications will be available for download at www.njusbc.com in PDF format to the NJ State USBC Scholarship Committee no later than March 31ST 2025 to:

Charlie Dekowski, Chairperson Shirlee Kutzner / Donald M. Roberts Stars of Tomorrow 25 Gesner Street Linden, NJ 07036 908-768-4895

scholarships@njusbc.com

E-MAILS WILL BE ACCEPTED

Scholarship awards shall be placed into the USBC Smart Program. **SMART** which stands for **S**cholarship **M**anagement and **A**ccounting **R**eports for **T**enpins is a program designed to help associations set up manage and disburse youth bowling scholarship funds. USBC Smart Program policies and procedures shall be followed by Scholarship winners. These policies can be found on, **bowl.com** the USBC website.





New Jersey State USBC Scholarship Program Shirlee Kutzner & Donald M Roberts Stars of Tomorrow (Application must be postmarked by MARCH 31ST)



NAME	DATE OF BIRTH				
ADDRESS					
CITY	STATE ZIP				
EMAIL -	PHONE	i 			
HIGH SCHOOL ATTENDED					
LOCAL USBC YOUTH ASSOCIATION —	USBC NUMBER				
NUMBER OF YEARS IN YOUTH BOWLING					
NAME OF BOWLING CENTER(S) AT WHICH YOU					
CURRENT USBC YOUTH AVERAGE					
HIGHEST GAMES BOWLED					
HIGHEST SERIES BOWLED					
TOURNAMENT	PARTICIPATION / HIG	<u>GHLIGHTS</u>			
NAME OF TOURNAMENT			YEAR	FINISH	
1					
2					
3					
4					
5					
6(PLEASE ATTACH ADDITIONAL SHEETS TO A	PPLICATION IF NECESS	SARY)			
LIST ANY ADDITITIONAL AWARDS	OR BOWLING ACHIEV	/EMENTS YOU HA	AVE EARNED		
SIGNATURE OF BOWLING COA	ACH OR YOUTH DIRE		LEAGUE		
(SIGNATURE)		(PRINT NAME)			



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PLEASE ATTACH ADDITIONAL SHEETS IF NECESSARY

LIST SCHOOL SPECIAL HONORS AND AWARDS			
LIST CLUBS, MEMBERSHIPS, SPORTS PLAYED AND OTHER HIGH SCHOOL ACTIVITIES			
LIST COMMUNITY SERVICE ACTIVITIES (THESE MUST HAVE A WRITTEN DOCUMENTATION BY AN OFFICIAL)			

ATTACH ESSAY OF 200 WORDS OR MORE GIVING YOUR REASONS FOR APPLYING FOR OUR SCHOLARSHIP

PLEASE NOTE ALL CANDIDATES MUST PROVIDE AT LEAST 2 LETTERS OF REFERENCE, WITH AT LEAST ONE FROM A BOWLING COACH OR BOWLING INSTRUCTOR

REMEMBER THAT YOU THE APPLICANT ARE RESPONSIBLE FOR COMPLETING AND SUBMITTING THIS FORM ON TIME. APPLICATIONS THAT ARE POSTMARKED AFTER THE DEADLINE DATE OR INCOMPLETE WILL NOT BE CONSIDERED.

Applications must return completed and mailed to the NJ State USBC Scholarship Committee no later than MARCH 31ST to:

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