

**JEANNETTE KNEPPRATH SCHOLARSHIP
WISCONSIN STATE USBC WOMEN'S BOWLING ASSOCIATION**

Please Print Legibly

1794 Allouez Ave., Suite D

GREEN BAY, WI 54311

PART I – TO BE COMPLETED BY APPLICANT

NAME (LAST)	(FIRST)	(M. I.)	BIRTH DATE	DATE OF APPLICATION
ADDRESS (STREET)	CITY	STATE	ZIP CODE	TELEPHONE NO.
PARENT/GUARDIAN NAME	CITY	STATE	ZIP CODE	TELEPHONE NO.
NAME OF LOCAL BOWLING ASSOCIATION				
HIGH SCHOOL NAME	CITY	STATE	ZIP CODE	
POST SECONDARY SCHOOLS APPLIED	CITY	STATE	ZIP CODE	ACCEPTED DATE
1.				
2.				

PLEASE ANSWER THE FOLLOWING:

Date of Graduation: _____, 20 _____

I have been a member of organization(s) (other than WS USBC YA) _____ No Yes

I have held a leadership position in organization(s) (other than WS USBC YA) _____ No Yes

LIST ORGANIZATION(S) (ONLY 2)	LEADERSHIP POSITION
1. _____	
2. _____	

SIGNATURE OF APPLICANT _____ DATE _____

PART II – TO BE COMPLETED BY WS YBA OFFICIAL

Applicant member of WS USBC YA for _____ Year (s). (total number of years)

Applicant league officer for _____ Year (s) (total number of years)

Applicant attends league sessions regularly _____ No Yes

Applicant knows how to keep score _____ No Yes

Applicant observes league and establishment rules _____ No Yes

Applicant observes bowling etiquette and sportsmanship _____ No Yes

How many Local and State Tournaments has the applicant bowled in? _____ Number of Tournaments

Any other Tournaments? _____ Number of Tournaments

Is the applicant a Certified Coach? _____ No Yes

Is the applicant a member of their local association board? _____ No Yes

WS USBC YA OFFICIAL NAME AND ADDRESS (Please print above line): _____

Address	City	State	Zip
Signature	Position	Date	

PART III – TO BE COMPLETED BY SCHOOL OFFICIAL

Applicant will be graduating in good standing within the current academic year _____ No Yes

To the best of my knowledge the applicant has provided true and accurate information _____ No Yes

At the close of Semester One of the current academic year, the applicant's official GPA was _____ (GPA based on 4 point scale)

SCHOOL OFFICIAL NAME AND ADDRESS (please print above line)

SIGNATURE _____ POSITION _____ DATE _____

NOTE TO APPLICANT:

**MAIL TO WS USBC WBA, 1794 Allouez Ave., Suite D, Green Bay, WI 54311, BEFORE March 1st DEADLINE.
ESSAY TO BE INCLUDED WITH APPLICATION**