

BOARD APPLICATION INFORMATION

ALL INTERESTED CANDIDATES MUST COMPLETE AN APPLICATION AND SUBMIT TO THE NOMINATING COMMITTEE (BOB DIVINE, BRIAN KOLBERG, CONNIE SMITH, OR VAL REBHORN) BY APRIL 17TH, 2009. THESE CAN BE TURNED IN TO US PERSONALLY OR LEFT AT FOUR SEASONS SPORTS OR MARDI GRAS LANES TO OUR ATTENTION.

THE POSITIONS BELOW WILL BE ELECTED AT THE DEKALB AREA USBC ANNUAL MEETING, APRIL 25TH, 2009 @ PIZZA PROS, 928 W LINCOLN HWY, DEKALB, IL 60115. THE MEETING WILL BEGIN AT 7PM.

LISTED BELOW ARE THE POSITIONS THAT WILL BE ELECTED ON APRIL 25TH, 2009.

- **PRESIDENT** --- RESPONSIBILITIES INCLUDE BUT NOT LIMITED TO:
 1. TERM OF OFFICE IS TWO YEARS WITH A LIMIT OF THREE TERMS
 2. APPOINTS AND OVERSEES ALL COMMITTEES
 3. PREPARES A WRITTEN REPORT TO PRESENT AT THE MEMBERSHIP MEETINGS
 4. CONDUCTS ORIENTATION OF ALL NEW BOARD MEMBERS
 5. BE FAMILIAR WITH THE ASSOCIATION HANDBOOK
 6. CO-SIGNS CHECKS WHEN PAYMENTS ARE MADE
 7. APPOINTS ASSOCIATE DIRECTORS

- **2ND VICE PRESIDENT** --- RESPONSIBILITIES INCLUDE BUT NOT LIMITED TO:
 1. TERM OF OFFICE IS TWO YEARS WITH NO LIMIT
 2. FAMILIARIZE HIMSELF/HERSELF WITH THE DUTIES OF THE PRESIDENT
 3. PRESIDE OVER MEETINGS WHEN THE PRESIDENT AND 1ST VICE PRESIDENT IS ABSENT
 4. PARTICIPATE ON COMMITTEES APPOINTED BY THE PRESIDENT
 5. ACT AS SARGENT OF ARMS

- **DIRECTORS #1-4** --- RESPONSIBILITIES INCLUDE BUT NOT LIMITED TO:
 1. TERM OF OFFICE IS TWO YEARS WITH NO LIMIT ON TERMS
 2. SERVE ON VARIOUS COMMITTEES
 3. ATTEND MEETINGS AND ACTIVELY PARTICIPATE IN THE ASSOCIATION
 4. GIVE ASSISTANCE TO THE ASSOCIATION, LEAGUE OFFICERS AND MEMBERS WHEN REQUESTED
 5. ASSIST AT THE ASSOCIATION TOURNAMENTS

- **YOUTH REPRESENTATIVES** (APPOINTED BY YOUTH COMMITTEE)

- **STATE AND NATIONAL DELEGATES**

PLEASE NOTE: (ARTICLE V SECTION B ELIGIBILITY #3 & #4) (CURRENT DAUSBC ASSOCIATION BYLAWS)

3. TO BE ELIGIBLE TO SERVE AS PRESIDENT, A CANDIDATE MEMBER MUST HAVE SERVED AS A VICE-PRESIDENT FOR AT LEAST (2) YEARS ON THE CURRENT DAUSBC BOARD.
4. TO BE ELIGIBLE TO SERVE AS VICE-PRESIDENT, A BOARD MEMBER MUST HAVE SERVED AS A DIRECTOR FOR AT LEAST (2) YEARS ON THE CURRENT BOARD OR ON THE FORMER DEKALB BOWLING ASSOCIATION OR THE DEKALB AREA WOMEN'S BOWLING ASSOCIATION.

THE NOMINATING COMMITTEE WILL ONLY ACCEPT NOMINATIONS FROM THE FLOOR AT THE ANNUAL MEETING IF WE HAVE RECEIVED A COMPLETED APPLICATION PRIOR TO THE START OF THE MEETING.

IF YOU HAVE ANY QUESTIONS REGARDING THE RESPONSIBILITIES OF THE ABOVE POSITIONS OR REGARDING THIS APPLICATION, PLEASE CONTACT THIS YEARS NOMINATING COMMITTEE:

BOB DIVINE:	815/761-0508
BRIAN KOLBERG:	815/756-9411
CONNIE SMITH:	815/758-6099
VAL REBHORN:	815/751-8125

THANK YOU FOR YOUR INTEREST AND YOUR COMPLETED APPLICATION!!

BOARD APPLICATION

Name: _____ Board Position applying for: _____

Street Address: _____

Phone #: _____ Are you under 18 years of age? Yes No

Have you ever been convicted of a crime of pleaded no contest for any offense or violation other than a minor traffic violation? Yes No
If yes, explain the 1) nature of the crime 2) date of conviction and 3) state in which convicted.

Special Skills: Please list any special skills you have that may assist you in the position that you are applying for.

EDUCATION

<u>SCHOOL</u>	<u>Name and Location</u>	<u>Number of Years Attended</u>
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High School-- _____

College-- _____

Other-- _____

Training Courses: List any academic honors, awards, scholarships, professional organizations, volunteer activities, certificates, licenses or any other information you consider significant and relevant to the position to which you are applying.

ASSOCIATION HISTORY -- List present or most recent association positions held first. Complete even if this form is accompanied by a resume.

Association Name: _____ Position Title: _____

Street Address: _____ City: _____ State: _____

Association Phone:	Start Date	End Date	May we contact association?
			Yes No

Describe Duties/Responsibilities: _____

Reason for Leaving: _____

Association Name: _____ Position Title: _____

Street Address: _____ City: _____ State: _____

Association Phone:	Start Date	End Date	May we contact association?
			Yes No

Describe Duties/Responsibilities: _____

Reason for Leaving: _____

REFERENCES: List (3) people other than close friends or relatives who have knowledge of your background or education regarding the sport of bowling.

Name	Address	Phone #	# of years known
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1. _____
2. _____
3. _____

PLEASE READ CAREFULLY BEFORE SIGNING. All information contained in this application is true to the best of my knowledge and belief. I understand the misrepresentations or omissions of any kind may result in denial or removal from office (whichever is applicable). **If you apply for a position, you are committed to fulfilling that position, to the best of your abilities!**

Applicant: _____ Date: _____