



Volunteer of the Year Nomination Form

Application due no later than June 1st of Current Season

This prestigious award recognizes an adult volunteer who has displayed outstanding efforts to foster, operate and promote certified bowling programs at the local or state level.

Please complete this nomination form and return to the address at the bottom of this form.

Type or print all answers clearly and fill in all information completely.

Section A- Nominee Information

Last Name _____ First Name _____

USBC # _____ Phone _____

E-Mail _____

List Organization(s) for which the Nominee Volunteers

Name of Organization _____

Number of Years _____

Name of Organization _____

Number of Years _____

Name of Organization _____

Number of Years _____

Name of Organization _____

Number of Years _____

On a separate piece of paper please explain the nominee's involvement with each organization and why you feel they are worthy of consideration for this award. Feel free to include any letters of recommendation for the nominee.

Section B - Your Information

Last Name _____ First Name _____

Address _____

Phone _____ Email _____

Your affiliation or relationship with nominee _____

Your signature _____

Date _____

Send Nominations to Recognition Committee
Oregon State USBC
PO Box 33256
Portland, OR 97292

Email: recognition@osusbc.com