

GREATER FREDERICKSBURG USBC ASSOCIATION BOARD OF DIRECTORS APPLICATION



Position Applying For: President VP #1 VP #2 VP #3 Sgt-@-Arms Dir #1 Dir #2 Dir #3 Dir #4 Dir #5 Dir #6 Volunteer					
Name (Last)		Name (First, Middle)			
Street Address			Day Telephone ()		
City, State, Zip Code			Evening Telephone ()		
Email Address					
USBC ID #	Number years USBC Member (include previous ABC, WIBC, YABA Number years GFUSBCA Member				
Have you ever worked with USBC, (ABC, WIBC, YABA, etc.) National Association before, or any other state? If yes, please enter association names or state names.					
Have you ever been convicted of a crime or pleaded no contest for any offense or violation other than minor traffic violations? Yes No					
If yes, explain 1) nature of crime, 2) date of conviction, and 3) state in which convicted. (Convictions are not an automatic bar from Board acceptance.)					
Do you have any pending criminal charges against you? Yes No If yes, describe 1) nature of crime, 2) date issued, and 3) county and state where issued.					
SKILLS & KNOWLEDGE					
Do you have a <u>working or better</u> knowledge of: DUSBC Rules and Regulations Roberts Rules of Order Microsoft Word Microsoft Excel Microsoft PowerPoint Microsoft Access Email (<u>used regularly</u>) Other – Please specify Please list any other skills you have that you think will benefit the association (Attach additional sheets and/or resume if necessary):					

ASSOCIATION HISTORY - List present	<u> </u>	ns first. Complete even if		
accompanied by a resume. Attach separate	• •			
Association Name	Position Title	Position Title		
Street Address	Start Date	End Date		
City State, Zip	Association's Phone	May we contact this association?		
		Yes No		
Describe Duties/Responsibilities:	Reason for leaving	Reason for leaving		
Association Name	Position Title	Position Title		
Street Address	Start Date	End Date		
City State, Zip	Association's Phone ()	May we contact this association?		
		Yes No		
Describe Duties/Responsibilities:	Reason for leaving	Reason for leaving		
Association Name	Position Title	Position Title		
Street Address	Start Date	End Date		
City State, Zip	Association's Phone	May we contact this association?		
		Yes No		
Describe Duties/Responsibilities:	Reason for leaving			
List Association committee assignments, begin sheet if necessary	ning with the most recent office or c	ommittee. Attach additional		
Present	Past	Past		

Please Read Carefully Before Signing This Form

All information contained in this application is true to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial or removal from office (whichever is applicable).

Note: Each member of the Board of Directors is required to enroll in the USBC Registered Volunteer Program (RVP) and complete the Safesport training as a condition to being elected/appointed/hired to the GFUSBCA Board of Directors. We must also stress the importance of attendance at meetings and tournaments.

Signature _____ Date: _____