

# MINNESOTA STATE USBC ASSOCIATION TOURNAMENT DIRECTOR APPLICATION

(Please type or print in black ink)

|   |                             |   |
|---|-----------------------------|---|
| <b><u>APPLICANT INFORMATION</u></b>   |                             | <b>DIRECTOR POSITION(S)</b><br>Check all you are applying for:  |
| _____   | _____                       | <input type="checkbox"/> WOMEN <input type="checkbox"/> OPEN<br><br><input type="checkbox"/> SENIOR <input type="checkbox"/> MIXED <input type="checkbox"/> YOUTH |
| Last Name   | First Name – Middle Initial |   |
| _____   | _____                       |   |
| Address   | City / State / Zip          |   |
| _____   | _____                       |   |
| Day Phone   | Evening Phone               | E-Mail Address  |
| _____   | _____                       | _____   |
| Are you under 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No   |                             |   |
| Have you ever been convicted of a crime or pleaded no contest<br>for any offense or violation other than minor traffic violations? <input type="checkbox"/> Yes <input type="checkbox"/> No |                             |   |
| If yes, explain 1) Nature of Crime, 2) Date of Conviction, and 3) State in which convicted.<br>(Convictions are not an automatic bar from employment.)                                      |                             |   |
| _____<br>_____<br>_____   |                             |   |

|                         |                          |   |
|-------------------------|--------------------------|---|
| <b><u>EDUCATION</u></b> |                          |   |
| <b>School</b>           | <b>Name and Location</b> | <b># Yrs Attended      Diploma or Degree Received</b>                         |
| High                    | _____                    | _____ <input type="checkbox"/> Yes <input type="checkbox"/> No                |
| College                 | _____                    | _____ <input type="checkbox"/> Yes <input type="checkbox"/> No    Type: _____ |
| Other<br>(Specify)      | _____                    | _____ <input type="checkbox"/> Yes <input type="checkbox"/> No    Type: _____ |

**SKILLS AND ABILITIES** – Please describe your knowledge of bowling, management, office and organizational skills, computer knowledge, office equipment usage experience, experience with WinLABS, word processing, spreadsheets and financial management software programs.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

|   |                               |                       |
|---|-------------------------------|-----------------------|
| <b><u>REFERENCES</u></b> – List three persons other than friends or relatives who have knowledge of your bowling background, education, computer and office skills. |                               |                       |
| <b><u>Name</u></b>  | <b><u>Mailing Address</u></b> | <b><u>Phone #</u></b> |
| _____   | _____                         | _____                 |
| _____   | _____                         | _____                 |
| _____   | _____                         | _____                 |

