

**2017**  
**MT.PLEASANT BOWLER'S**  
**YOUTH EDUCATION GRANT PROGRAM**  
... INSTRUCTIONS TO APPLICANT ...

**ELIGIBILITY RULES:**

Any graduating high school senior is eligible to receive a grant, providing the student meets the following requirements:

- A. Files an application furnished by the Grant Committee, giving complete information as required thereon, before **APRIL 15<sup>th</sup>** of any year. Application is to be filed with the secretary of the Grant Committee.
- B. Has unimpaired amateur standing in bowling.
- C. Is a past or current member in good standing for **at least 3 years** of an organized Mt. Pleasant Youth bowling program or Mt. Pleasant High School Bowling team.

**APPLICATION PROCEDURE: PLEASE INCLUDE A SENIOR PICTURE WITH APPLICATION** (FOR PUBLICITY PURPOSES ONLY)

**STEP 1:** Fill out Application for Grant (Page 2) completely

Type or print your name on all forms asking for applicant's name.

**STEP 2:** Type or print an essay of at least 100 words stating your specific college and future plans. Print or type your name in the upper left hand corner. Judging will be based on the inclusion of specific plans, clarity, organization and logic. (Attach to Application for Grant)

**STEP 3:** Give your bowling coach your completed Application for Grant form, your essay and the Coach's Evaluation and Data Sheet (Page 3) and a stamped envelope addressed to the secretary of the Grant Committee. Ask your bowling coach to fill out the evaluation and data sheet entirely and to mail all forms to the secretary of the Grant Committee by **April 15<sup>th</sup>**.

**STEP 4:** Give the School Official/Counselor's Evaluation Sheet (Page 4) to one of your teachers or school counselors along with a stamped envelope addressed to the secretary of the Grant Committee. Ask your teacher or counselor to fill out the evaluation and data sheet entirely and mail it to the Grant Committee by **April 15<sup>th</sup>**.

**STEP 5:** Check with your league coach and teacher or counselor by **April 10<sup>th</sup>** to make sure all the application papers have been mailed. Thank them for their help and cooperation.

Stamped envelopes should be addressed to:

Mt. Pleasant Bowler's Grant Committee  
c/o Nita Yager  
1406 W. Broadway St.  
Mt. Pleasant, MI 48858

**MT PLEASANT BOWLER'S GRANT COMMITTEE  
YOUTH EDUCATIONAL GRANT FUND  
2017 APPLICATION FOR GRANT**

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

AGE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

TELEPHONE NO \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

PARENT OR GUARDIAN (full name) \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PARENT TELEPHONE NO \_\_\_\_\_ PARENT EMAIL ADDRESS \_\_\_\_\_

NAME OF HIGH SCHOOL \_\_\_\_\_

CURRENT YOUTH BOWLING PROGRAM/LEAGUE YOU ARE A MEMBER OF \_\_\_\_\_

HOW LONG HAVE YOU BEEN IN THIS PROGRAM/PROGRAM? \_\_\_\_\_ YEARS (Count current season as 1 year)

LIST BELOW OTHER YOUTH BOWLING PROGRAMS/LEAGUES YOU HAVE BEEN A MEMBER OF:

LEAGUE NAME \_\_\_\_\_ CITY/STATE \_\_\_\_\_

BOWLING CENTER \_\_\_\_\_ YEARS \_\_\_\_\_

LEAGUE NAME \_\_\_\_\_ CITY/STATE \_\_\_\_\_

BOWLING CENTER \_\_\_\_\_ YEARS \_\_\_\_\_

OFFICES HELD IN LOCAL YOUTH BOWLING PROGRAM: \_\_\_\_\_

OFFICES HELD IN OTHER YOUTH BOWLING PROGRAM: \_\_\_\_\_

BOWLING HONORS AND AWARDS: \_\_\_\_\_

SCHOOL ACTIVITIES AND OFFICES HELD: \_\_\_\_\_

COMMUNITY AND CIVIC ACTIVITIES: \_\_\_\_\_

WHAT COLLEGE, ETC. DO YOU WISH TO ATTEND? \_\_\_\_\_

HAVE YOU APPLIED? \_\_\_\_\_ HAVE YOU BEEN ACCEPTED? \_\_\_\_\_

WHAT IS YOUR PROPOSED MAJOR(S)? \_\_\_\_\_

WHAT ARE YOUR FINANCIAL NEEDS AND DREAMS? \_\_\_\_\_

**ATTACH ESSAY OF AT LEAST 100 WORDS STATING YOUR SPECIFIC COLLEGE & FUTURE PLANS**

To the best of my knowledge the above statements are correct.

\_\_\_\_\_  
Signature of Coach

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**DO NOT WRITE BELOW THIS LINE**

**FOR OFFICIAL USE ONLY**

DATE RECEIVED: \_\_\_\_\_ INITIALS: \_\_\_\_\_ APPLICANT NUMBER: \_\_\_\_\_ TRANSCRIPT REQUESTED: \_\_\_\_\_

NOTATIONS:

**MT PLEASANT BOWLER'S GRANT COMMITTEE  
YOUTH EDUCATIONAL GRANT PROGRAM  
2017 COACH'S EVALUATION AND DATA SHEET**

APPLICANT'S NAME \_\_\_\_\_ DATE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NAME OF COACH \_\_\_\_\_ TELEPHONE NO \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NUMBER OF YEARS APPLICANT HAS BOWLED IN YOUTH LEAGUES  
(Count current season as one year.) \_\_\_\_\_

NUMBER OF YEARS AS TEAM CAPTIAN  
(Count current season as one year.) \_\_\_\_\_

NUMBER OF YEARS AS YOUTH LEADER  
(Count current season as one year.) \_\_\_\_\_

NUMBER OF LEAGUE SESSIONS APPLICANT WAS ABSENT FROM THIS SEASON \_\_\_\_\_

AVERAGE AS OF FEBRUARY 15 (Minimum two-thirds of league games.) \_\_\_\_\_

DOES APPLICANT KNOW HOW TO KEEP SCORE? \_\_\_\_\_

DOES APPLICANT OBSERVE BOWLING ETIQUETTE AND SPORTSMANSHIP? \_\_\_\_\_

DOES APPLICANT OBSERVE LEAGUE AND CENTER RULES? \_\_\_\_\_

DOES APPLICANT SET A GOOD EXAMPLE FOR OTHER BOWLERS? \_\_\_\_\_

ADDITIONAL REMARKS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please send applicant's application form, essay and your evaluation  
sheet to the secretary of the Grant Committee no later than APRIL 15<sup>th</sup>.**

To the best of my knowledge, the above statements are correct.

\_\_\_\_\_  
Signature of Coach

\_\_\_\_\_  
Date

**MT PLEASANT BOWLER'S GRANT COMMITTEE  
YOUTH EDUCATIONAL GRANT PROGRAM  
2017 SCHOOL OFFICIAL OR COUNSELOR'S EVALUATION AND DATA SHEET**

APPLICANT'S NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NAME OF OFFICIAL OR COUNSELOR \_\_\_\_\_ TELEPHONE NO \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Official or Counselor: Please complete this sheet to enable this student to apply for a grant from the Mt. Pleasant Bowler's Youth Educational Grant Program. All answers will be confidential. Please mail the completed sheet to the Grant Committee, postmarked no later than **APRIL 15<sup>th</sup>** to ensure the student will be eligible.

MEMBER OF HIGH SCHOOL BOWLING TEAM? \_\_\_\_\_ IF SO, NUMBER OF YEARS \_\_\_\_\_

NAME OF SCHOOL \_\_\_\_\_

CLASS RANK \_\_\_\_\_ ATTENDANCE RECORD AT SCHOOL \_\_\_\_\_

GENERAL ATTITUDE TOWARD CLASSMATES AND TEACHERS \_\_\_\_\_

ACTIVITIES IN SCHOOL BESIDES CLASSROOM WORK \_\_\_\_\_

ADD ANY ADDITIONAL REMARKS YOU THINK WOULD BE HELPFUL IN EVALUATING THIS STUDENT:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To the best of my knowledge the above statement are correct.

\_\_\_\_\_  
Signature of Official or Counselor

\_\_\_\_\_  
Date