



## Coach of the Year Nomination Form

Return by March 1, 2018.

(Please include a photo with the application)

Please print all information clearly.

Nominee's Full Name: \_\_\_\_\_

Nominee's Address: \_\_\_\_\_

Nominee's City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Nominee's Evening Phone Number: \_\_\_\_\_

Bowling Center where Nominee Volunteers: \_\_\_\_\_

Number of Years Nominee Volunteered in Youth Bowling Programs (AJBC, YABA, USBC): \_\_\_\_\_

Coaching Classes Completed by Nominee: \_\_\_\_\_

Please write a statement on the nominee's history, service, and accomplishments (Use additional pages if needed):

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

Submitter Name: \_\_\_\_\_

Submitter Address: \_\_\_\_\_

Submitter City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Submitter Evening Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Submitter Affiliation/Relationship to Nominee: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Mail To: OSUSBC, 4928 Hickory Woods Trail, Dayton, OH 45432**

Revised August 2017

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