

**INDIANA BOWLING ASSOCIATION, INC.**  
CHARLES "BUD" FRIDLIN SCHOLARSHIP FUND APPLICATION

**\*\*APPLICATION GUIDELINES\*\***

1. MUST BE A GRADUATING SENIOR BOWLING IN A SANCTIONED LEAGUE IN THE STATE OF INDIANA.
2. MUST PLAN TO ENROLL IN AN ACCREDITED SCHOOL OF HIGHER EDUCATION.
3. PLANNED ENROLLMENT MUST BE WITHIN ONE-YEAR FOLLOWING HIGH SCHOOL GRADUATION.
4. MUST RETURN THIS APPLICATION TO THE IBA EXECUTIVE DIRECTOR PRIOR TO *MARCH 1st* OF THE SENIOR YEAR.
5. MUST SUBMIT A HAND WRITTEN ESSAY OF 200 WORDS OR LESS DESCRIBING THE SPECIFIC EDUCATION PLANS.

NAME: \_\_\_\_\_ SSN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

PARENTS OR GUARDIAN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

YABA/ABC NUMBER: \_\_\_\_\_ HIGH SCHOOL NAME: \_\_\_\_\_

PLEASE COMPLETE THE FOLLOWING INFORMATION

HOW LONG HAVE YOU BEEN INVOLVED IN YABA/ABC PROGRAMS (Count Current Year as One): \_\_\_\_\_

OFFICES HELD IN PROGRAMS (Team Captain or League Officer) AND YEARS IN EACH OFFICE. \_\_\_\_\_

\_\_\_\_\_

NUMBER OF TIMES BOWLED IN STATE & CITY TOURNAMENT. STATE: \_\_\_\_\_ CITY: \_\_\_\_\_

SCHOOL ACTIVITIES AND OFFICES HELD (Grades 9-12) \_\_\_\_\_

\_\_\_\_\_

COMMUNITY AND CIVIC ACTIVITIES (Grades 9 -12) \_\_\_\_\_

\_\_\_\_\_

## EDUCATION PLANS

TO WHAT INDIANA SCHOOLS HAVE YOU APPLIED? \_\_\_\_\_

TO WHAT INDIANA SCHOOLS HAVE YOU BEEN ACCEPTED? \_\_\_\_\_

WHICH INDIANA SCHOOL WILL YOU ATTEND? \_\_\_\_\_

WHAT IS YOUR PROPOSED COURSE OF STUDY? \_\_\_\_\_

*TO MY KNOWLEDGE, THE ABOVE STATEMENTS ARE TRUE AND CORRECT!*

\_\_\_\_\_  
*SIGNATURE OF APPLICANT    SIGNATURE OF PARENT OR GUARDIAN*

I certify that \_\_\_\_\_ has been a member of The \_\_\_\_\_ League  
at \_\_\_\_\_ Lanes during the current bowling season.

\_\_\_\_\_  
*YABA/ABC ASSOCIATION SECRETARY*

### APPLICATION CHECKLIST

- (1) ANSWERED ALL QUESTIONS THAT APPLY.
- (2) *INCLUDED A 200 WORD ESSAY.*
- (3) HAVE MY ASSOCIATION SECRETARY SIGNATURE.
- (4) INCLUDED ADDITIONAL INFORMATION SHEETS IF REQUIRED.
- (5) MAILED APPLICATION PRIOR TO *MARCH 1<sup>ST</sup>*.

Return the completed Scholarship Application by *MARCH 1<sup>ST</sup>* to:  
DAN CAPPA,  
EXECUTIVE DIRECTOR  
3520 WYNFIELD DRIVE  
RICHMOND, IN 47374