

Iowa State USBC District Supervisor Nomination Form

NAME \_\_\_\_\_ LOCAL ASSOCIATION \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_  
USBC Membership # \_\_\_\_\_ (required) RVP Certified \_\_\_\_\_ Expiration Date \_\_\_\_\_  
District Applying for \_\_\_\_\_ Safe Sport certified \_\_\_\_\_ Expiration Date \_\_\_\_\_

To be considered for this position, you must be willing to have the RVP background check and complete the safe sport training

Local Offices held or local Youth Leader involvement (please list years): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Iowa State USBC/YABA Offices held or Youth involvement (please list years): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Served as Delegate or committees at Annual Meeting/Convention (please list years & committees): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Certified Coach: Yes \_\_\_\_\_ No \_\_\_\_\_ # of Years \_\_\_\_\_

Any Other information about yourself: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you be able to run the Family Doubles District event (usually the 1<sup>st</sup> weekend of December) and the Pepsi District event (usually around the weekend of February 15<sup>th</sup>) Yes \_\_\_\_\_ No \_\_\_\_\_

Deadline April 1, 2025

Send to: Iowa State USBC  
Jolene Ketelsen, Youth Coordinator  
815 11<sup>th</sup> Avenue  
DeWitt, IA 52742  
563-659-3150 (office)  
563-210-4653 (cell)  
[youth.coordinator@iowabowl.com](mailto:youth.coordinator@iowabowl.com)

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

Signature: \_\_\_\_\_