

JOB DESCRIPTION

POSITION TITLE: ASSOCIATION MANAGER

POSITION SUMMARY: The Association Manager is responsible for overseeing the operations of the association, providing administrative support and the coordination of services necessary to comply with USBC Performance Standards.

SUPERVISED BY: Reports to and is selected/appointed/hired by the Association Board of Directors who will allocate additional human and financial resources on a task basis as necessary. Association Manager reports to the board on a regular basis (at least quarterly), to USBC national headquarters as required; and to membership at least once per year. Association Manager works very closely with the Association Officers.

DUTIES AND RESPONSIBILITIES:

In addition to mandatory requirements in the bylaws, the duties and responsibilities of this position include, but are not limited to, the following.

- ◆ Implements directives of the association board of directors (Strategic Planning, Performance Standards, etc.)
- ◆ Responsible for membership and awards processing.
- ◆ Maintain averages and bowler of the year data.
- ◆ Maintain appropriate files as required by USBC , state and federal entities.
- ◆ Maintain financial records of the association as directed by federal and state governments as well as USBC and the association board of directors.
- ◆ Works in conjunction with the board of directors, adheres to USBC. Performance Standards, USBC and association bylaws.
- ◆ Implements and monitors the strategic action plan of the association and its progress. Reports progress towards specific goals to the board of directors quarterly.
- ◆ Responsible for the overall finances of the association which include
 - Preparing a budget for board approval.
 - Submitting written financial reports at all board and association meetings
 - Submitting written, audited, year-end financial reports at all board and association meetings.
 - Submitting a written, audited, year-end financial report.
 - Staying within the budget.
- ◆ Responsible for all association correspondence.
- ◆ Oversee the use of WINLABS to enter and transfer information to USBC
- ◆ Notifies each league secretary, in writing, of the programs and services offered by the association.
- ◆ Submits reports to USBC and the state association as requested.

QUALIFICATIONS:

- Sanctioned league bowling knowledge preferred.
- Office, accounting and organizational skills (at least 3 years experience).
- Knowledge in social media
- Experience with tournament/bracket programs (i.e. TournamentBowl, Braxion, BLS)
- Computer skills (MS Word, Excel, and Excess)
- Advanced knowledge of QuickBooks accounting software.
- Strong oral and written communications skills and experience.
- Marketing and public relations experience preferred.
- Three years experience on the board of directors of a local ABC, WIBC, YABA, or USBC bowling association preferred.
- Must have or is willing to obtain an e-mail address and have knowledge of e-mail procedures.

EDUCATION REQUIREMENTS

High school diploma or equivalent required.

The attached application and personal resume must be submitted to the following address: Central Texas USBC: 302 Atlas Avenue, Killeen TX 76542

**EMPLOYMENT APPLICATION FOR ASSOCIATION MANAGER
Central Texas USBC**

APPLICANT INFORMATION - PLEASE TYPE OR PRINT CLEARLY			
NAME (FIRST, MI, LAST)			
STREET, ADDRESS, CITY, ZIP			
DAY TELEPHONE		ALTERNATE TELEPHONE	
E-MAIL ADDRESS			
ARE YOU AT LEAST 18 YEARS OF AGE?		SOCIAL SECURITY No.	
HIGHEST EDUCATION LEVEL ATTAINED?			

<p>ARE THERE OTHER NAMES UNDER WHICH YOU WORKED OR ATTENDED SCHOOL? IF YES, PLEASE LIST FOR REFERENCE CHECKING PURPOSES.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>HAVE YOU EVER BEEN CONVICTED OF A CRIME OR PLEADED NO CONTEST FOR ANY OFFENSE OR VIOLATION OTHER THAN MINOR TRAFFIC VIOLATIONS?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>IF YES, EXPLAIN</p> <p>1) NATURE OF CRIME</p> <p>2) DATE OF CONVICTION</p> <p>3) STATE IN WHICH CONVICTED.</p> <p>(CONVICTIONS ARE NOT AN AUTOMATIC BAR FROM EMPLOYMENT.)</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>DO YOU HAVE ANY PENDING CRIMINAL CHARGES AGAINST YOUT? IF YES, DESCRIBE</p> <p>1)NATURE OF CRIME,</p> <p>2) DATE ISSUES</p> <p>3) COUNTY AND STATE WHERE ISSUED</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

POSITION APPLYING FOR				
Central Texas USBC Association Manager				
How were you referred to this association?				
<input type="checkbox"/> Agency	<input type="checkbox"/> Walk-In	<input type="checkbox"/> Friend/Relative	<input type="checkbox"/> Newspaper	<input type="checkbox"/> Other
SPECIAL SKILLS				
PLEASE DESCRIBE PROCESSING SPEED, SOFTWARE KNOWLEDGE, AND OFFICE EQUIPMENT EXPERIENCE.				
PLEASE DESCRIBE OTHER OFFICE EQUIPMENT EXPERIENCE.				
EDUCATION				
SCHOOL	NAME AND LOCATION	NO YEARS ATTENDED	MAJOR SUBJECTS	DIPLOMA OR DEGREE RECEIVED
HIGH				<input type="checkbox"/> Yes <input type="checkbox"/> No
COLLEGE				<input type="checkbox"/> Yes <input type="checkbox"/> No
				TYPE
GRADUATE				<input type="checkbox"/> Yes <input type="checkbox"/> No
				TYPE
OTHER (SPECIFY)				<input type="checkbox"/> Yes <input type="checkbox"/> No
				TYPE
TRAINING COURSES - LIST ANY RELEVANT ACADEMIC HONORS, AWARDS, SCHOLARSHIPS, PROFESSIONAL ORGANIZATIONS, VOLUNTEER ACTIVITIES, CERTIFICATES, PUBLICATIONS, LICENSES, OR ANY OTHER INFORMATION YOU CONSIDER SIGNIFICANT AND RELEVANT TO EMPLOYMENT AT THIS ASSOCIATION:				
COURSE/SEMINAR	ORGANIZATION SPONSORING	CONTENT	DATE(S) ATTENDED	

EMPLOYMENT/ASSOCIATION HISTORY - LIST PRESENT OR MOST RECENT EMPLOYMENT AND/OR ASSOCIATION POSITIONS FIRST. COMPLETE EVEN IF ACCOMPANIED BY A RESUME.					
EMPLOYER/ASSOCIATION		POSITION TITLE		START DATE	END DATE
STREET ADDRESS			SALARY	HRS PER WEEK	
CITY, STATE, ZIP	LAST SUPERVISOR NAME	EMPLOYER/ASSOCIATION'S PHONE		MAY WE CONTACT THIS EMPLOYER/ASSOCIATION? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DESCRIBE DUTIES/RESPONSIBILITIES:				REASON FOR LEAVING	
EMPLOYER/ASSOCIATION		POSITION TITLE		START DATE	END DATE
STREET ADDRESS			SALARY	HRS PER WEEK	
CITY, STATE, ZIP	LAST SUPERVISOR NAME	EMPLOYER/ASSOCIATION'S PHONE		MAY WE CONTACT THIS EMPLOYER/ASSOCIATION? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DESCRIBE DUTIES/RESPONSIBILITIES:				REASON FOR LEAVING	
EMPLOYER/ASSOCIATION		POSITION TITLE		START DATE	END DATE
STREET ADDRESS			SALARY	HRS PER WEEK	
CITY, STATE, ZIP	LAST SUPERVISOR NAME	EMPLOYER/ASSOCIATION'S PHONE		MAY WE CONTACT THIS EMPLOYER/ASSOCIATION? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DESCRIBE DUTIES/RESPONSIBILITIES:				REASON FOR LEAVING	
EMPLOYER/ASSOCIATION		POSITION TITLE		START DATE	END DATE
STREET ADDRESS			SALARY	HRS PER WEEK	
CITY, STATE, ZIP	LAST SUPERVISOR NAME	EMPLOYER/ASSOCIATION'S PHONE		MAY WE CONTACT THIS EMPLOYER/ASSOCIATION? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DESCRIBE DUTIES/RESPONSIBILITIES:				REASON FOR LEAVING	

REFERENCES - LIST THREE PERSONS OTHER THAN PERSONAL FRIENDS AND RELATIVES WHO HAVE KNOWLEDGE OF YOUR BOWLING BACKGROUND OR EDUCATION.		
NAME	MAILING ADDRESS	PHONE NO. (DAY)

Please Read Carefully Before Signing This Form

1. All information contained in this application is true to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am selected/hired.
2. I authorize this association to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to my employment or me.
3. I understand that upon receiving a job offer, a physical examination and drug screening may be required. (Note: If this is a job requirement, you will be notified.
4. Regardless of whether or not I become selected/hired by this association, I recognize that this application is not and should not be considered a contract of employment. I understand that selection/employment at this association is on an at-will basis and that my selection/employment may be terminated with or without cause, and without notice, at any time, at my option or the association unless specifically provided otherwise in a written selection/employment contact. I further understand that no association employee or representative has the authority to enter into a contact regarding duration or terms and conditions of selection/employment other than an officer or official of the association, and then only by means of a signed written document.

Signed by Applicant _____ - Date _____

Thank you for your interest in our association.