

Dear Student,

On behalf of the Robert E. Lee Chapter #1567 of United Daughters of the Confederacy, I am delighted that you are considering applying for one of our scholarships.

In order to qualify for the scholarship, students must:

1. Be the lineal descendant of an eligible Confederate (that is, one who served honorably in the Confederate Army, Navy, or Civil Service or who gave Material Aid to the Cause). An applicant who is a collateral descendant must be a member of the Children of the Confederacy or the United Daughters of the Confederacy;
2. Applicant must be a citizen of the United States, residing in Cooper County or an adjacent county with no UDC chapter.
3. Applicant must be a graduating Senior who is enrolled in an accredited college or university, technical college, or Post-secondary vocational School;
4. Applicant must have a minimum 3.0 grade point average in high school;
5. Applicants must complete and submit the official UDC scholarship packet no later than **February 1, 2020** to Barbara Dahl, 10364 Highway 5, Bunceton, Missouri, 65237. Late or incomplete applications will not be considered.
6. Be sure to follow the General Application **checklist** requirements **exactly**.

Some families have kept careful records of their Confederate ancestor(s), and others have heard that they had a Confederate ancestor, but no one has done any research to verify that a lineal ancestor did serve. You are about to verify that information for yourself and have an exciting adventure as you discover more of your family history.

#### **YOU WILL NEED TWO KINDS OF PROOF:**

**1. Your relationship to your Confederate ancestor.** You must be able to trace the links between each generation to prove your lineage to your ancestor. Many families have several ancestors who served, so if one cannot be proved, try another.

You will need to supply your birth certificate and copies of any birth, marriage and death certificates that you can locate that prove your relationship back to your ancestor - probably six to seven generations. Census records and obituaries can also be used when old birth, marriage and death certificates are not available. Check with the county historical society where your ancestors lived and died. Ancestry.com is helpful here, but you **cannot** use the Ancestry.com printout as your proof of lineage.

#### **2. Your Ancestor's Service Record.**

You need to prove the dates that your ancestor served, the unit and state he served in and his rank, if possible. (See General Application Checklist) You can check on line at "Fold 3" and also the Secretary of State Soldiers Data Base for this information.

Please call me if you have any questions.  
Barbara Dahl 660-838-6088

*United Daughters of the Confederacy*  
*Robert E. Lee Chapter #1567*  
**Scholarship Application**

Name \_\_\_\_\_

Permanent Address \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail address \_\_\_\_\_

**TELL US ABOUT YOURSELF**

What college or university will you be attending? \_\_\_\_\_

What is your proposed major in college? \_\_\_\_\_

Explain your educational and career goals. \_\_\_\_\_

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

**Describe in paragraph form your community involvement (e.g. church, civic, club), including service activities and any patriotic activities in which you have been involved. Use an additional sheet of paper if needed.**

**Were you on the Honor Roll? \_\_\_\_\_**

**If yes, which years? \_\_\_\_\_**

**List other honors and awards you have received during high school.**

**List leadership roles that you have assumed in the past four years.**

**What type of Extra Curricular Activities/Groups did you participate in during High School? List year(s) of participation and the activity.**

YEAR

ACTIVITY

**What is your High School G.P.A.? \_\_\_\_\_ Your Class Rank? \_\_\_\_\_ of \_\_\_\_\_  
(number of students)**

**Were you active in C of C? \_\_\_\_\_ How many years? \_\_\_\_\_**

**Were you employed while you were in High School? \_\_\_\_\_ Yes \_\_\_\_\_ No**

**If you were employed, give your work experience over the past four years, including employer's names and addresses and length of time you have been employed at that position or place of business.**

**Will you be attending college with the aid of the A+ Program? \_\_\_\_\_**

**Do you anticipate receiving any additional scholarships or grants? List.**

**The Scholarship committee gives careful consideration to all the information provided on the application. Explain why you believe that you should be considered for this scholarship.**

**Is there anything else you would like to tell us about yourself? Use an additional sheet of paper if necessary.**

**Date \_\_\_\_\_ Signature \_\_\_\_\_**

Approved 1/11/2014

✓ ✓ ✓ ✓

✓ ✓ ✓ ✓

✓ ✓ ✓ ✓

- ✓ ✓ ✓ ✓

✓ ✓ ✓ ✓

- ✓ ✓ ✓ ✓

✓ ✓ ✓ ✓

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✓ ✓ ✓ ✓

# United Daughters of the Confederacy®

## General Scholarship Application Form

Date \_\_\_\_\_

1. Name \_\_\_\_\_ 2. Area code/telephone \_\_\_\_\_

3. Permanent address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

4. E-mail \_\_\_\_\_

5. Date of Birth \_\_\_\_\_ 6. Date of High School graduation \_\_\_\_\_

7. College student currently? \_\_\_\_\_ If yes, classification \_\_\_\_\_

9. Name of parents or guardian \_\_\_\_\_

10. Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

11. Occupation: Father \_\_\_\_\_ Mother \_\_\_\_\_

12. Name of Confederate ancestor \_\_\_\_\_

13. For military service, give unit & state (include rank, if available) \_\_\_\_\_

For civil service or Material Aid, give full description of service \_\_\_\_\_

14. If applicant is a UDC/CofC member, approved original UDC/CofC application is enclosed instead of Lineage Form.

15. If applicant's relative is a UDC/CofC member, complete the following (use back of page if more space is needed)

Name of Member	Relation	UDC	CofC	Chapter Name/Number

16. High school preparation for college (course of study) \_\_\_\_\_

17. Cumulative GPA/scale \_\_\_\_\_ Test scores: SAT \_\_\_\_\_ and/or ACT \_\_\_\_\_

18. Name of college or university applicant will attend \_\_\_\_\_

19. Address \_\_\_\_\_ 20. Proposed major \_\_\_\_\_

21. Sponsoring UDC Chapter name/number and Division or CWND \_\_\_\_\_

22. \_\_\_\_\_ President of \_\_\_\_\_ Chapter

(original signature required on original form)

\_\_\_\_\_ Second Vice President of \_\_\_\_\_ Chapter

(original signature required on original form)

\_\_\_\_\_ President of \_\_\_\_\_ Division

(original signature required on original form)

\_\_\_\_\_ Second Vice President of \_\_\_\_\_ Division

(original signature required on original form)

# Financial Report Form

Date \_\_\_\_\_ Name of Applicant \_\_\_\_\_  
*(If applicant is self-supporting, use the parents' spaces for self and spouse)*

Applicant's father/guardian or spouse

Applicant's mother/guardian or spouse

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Employer \_\_\_\_\_

Employer \_\_\_\_\_

Position \_\_\_\_\_

Position \_\_\_\_\_

Parents/Guardian Combined Annual income	under \$25,000	\$25,000 to \$50,000	\$50,000 to \$75,000	\$75,000 to \$100,000	\$100,000 to \$150,000	\$150,000 to \$200,000	Over \$200,000
(Mark one)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other anticipated sources of income or financial aid (include other scholarships)

Other information concerning financial assets/obligations that explain need for UDC scholarship

Applicant's estimated expenses for one year of College/University

• Tuition	\$ _____
• Room and board	\$ _____
• Books and supplies	\$ _____
• Other (please specify)	\$ _____
<b>Total estimated expenses</b>	<b>\$ _____</b>

Additional comments \_\_\_\_\_

Applicant \_\_\_\_\_  
*(signature required)*

Father/guardian \_\_\_\_\_ Mother/guardian \_\_\_\_\_  
*(signatures required unless applicant is financially independent)*

Note: Original signatures required on original form.

# United Daughters of the Confederacy®

## LINEAGE FORM FOR NON-UDC/COFC MEMBERS

Complete lineage on chart below for all generations up to and including Confederate ancestor only. Proof of lineage is required as necessary to prove the line to the Confederate ancestor. (Birth and/or death certificates, census records, family Bible records or other authoritative sources) Applicant must be lineal descendant of Confederate ancestor unless a member of the UDC or CofC. Approved UDC/CofC membership application of relative may be used as proof of lineage on this form.

Generation 1

*Applicant*

I am the ☐ son ☐ daughter of

Generation 2

*Husband*

*Wife (maiden name)*

*Proof: Applicant's birth certificate*

The said \_\_\_\_\_ is the ☐ son ☐ daughter

Generation 3

*Husband*

*Wife (maiden name)*

*Proof:*

The said \_\_\_\_\_ is the ☐ son ☐ daughter

Generation 4

*Husband*

*Wife (maiden name)*

*Proof:*

The said \_\_\_\_\_ is the ☐ son ☐ daughter

Generation 5

*Husband*

*Wife (maiden name)*

*Proof:*

The said \_\_\_\_\_ is the ☐ son ☐ daughter

Generation 6

*Husband*

*Wife (maiden name)*

*Proof:*

The said \_\_\_\_\_ is the ☐ son ☐ daughter

Generation 7

*Husband*

*Wife (maiden name)*

*Proof:*

The said \_\_\_\_\_ is the ☐ son ☐ daughter

Generation 8

*Husband*

*Wife (maiden name)*

*Proof:*