

*United Daughters of the Confederacy®*

Texas Division Scholarship Application Checklist

Division	<u>Texas</u>	Date	_____
Sponsoring Chapter	_____	Applicant's name	_____
Location	_____	Permanent address	_____
Chapter Contact	_____	City, State, Zip	_____
Address	_____	Area code/phone	_____
Phone/E-mail	_____	E-mail	_____

**HOW TO SUBMIT APPLICATION (check completed)**

- All required materials placed flat in one stack in an envelope in the order listed below
- Materials not folded or stapled (may be secured with clip)
- Packet submitted to Second Vice President of sponsoring Chapter by Chapter's deadline to allow time to submit to Division Second Vice President by March 15 deadline
- Self-addressed, stamped 9 X 12 envelope enclosed if wish to have materials #1-4 returned

**REQUIRED MATERIALS – ONE EACH OF THE FOLLOWING (check completed)**

- 1. Wallet-sized photograph of head and shoulders suitable for publication in the UDC Magazine if applicant is awarded scholarship (print name on back of photo)
- 2. *Division Scholarship Application Checklist* (this form, revised 2014), complete with all information
- 3. *Lineage Form* (official UDC form, revised 2014), complete with all information and proof of lineage  
**OR** applicant's approved original UDC or CofC Application.
- 4. Copy of Confederate ancestor's service record (copy of approved UDC or CofC application is acceptable): a) for military, submit official Confederate military record from authoritative source, must show unit and state; b) for civil service or Material Aid, submit proof from authoritative source and give full description of service (if ancestor signed Oath of Allegiance prior to April 9, 1865, proof of further service required)

**REQUIRED MATERIALS – ORIGINAL SET AND FOUR COPIES (total of FIVE copies) OF THE FOLLOWING COLLATED SETS (check completed)**

- 5. *Texas Division Scholarship Application Form* (official UDC form, revised 2014), complete with all information Signed by UDC Chapter **and** Division (or CWND) President, and Second Vice President
- 6. Letter of endorsement from sponsoring UDC Chapter
- 7. Letter of recommendation from recent teacher/counselor (on school's letterhead) with objective evaluation of applicant
- 8. *Financial Report Form* (official UDC form, revised 2014), complete with all information
- 9. Official grade transcript of previous year and fall semester/quarter.
- 10. Signed **Letter** from applicant (maximum 300 words):
  - 1) pledging to make best possible use of the opportunity offered by a UDC scholarship;
  - 2) outlining goals and plans/preparation for meeting them;
  - 3) explaining what receiving a UDC scholarship would mean to the applicant.

**Any application not complying with the above requirements shall be classified as incomplete and shall not be submitted to the Texas Division Education Committee for consideration**

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Texas Division 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
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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 \_\_\_\_\_

\_\_\_\_\_  
*(original signature required on original form)* 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

**IMPORTANT:** Follow all instructions on the *Checklist*

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**LINEAGE FORM FOR NON-UDC/COFC MEMBERS**

Complete your lineage on the chart below for all generations up to and including your Confederate ancestor. 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:*

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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 <b>combined</b> Annual income (circle)	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
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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) \$
- Total estimated expenses \$

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

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

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

Note: Original signatures required on original form.