

Dr. C Fred McNary Scholarship Application



The Dr. Fred McNary scholarship is awarded annually to a graduating high school student or someone that is currently enrolled in an institution of higher learning. This scholarship is reviewed by the committee members of the Florida Society Military Order of the Stars and Bars. The requirement is that the applicant must be the descendant of a Confederate soldier, officer, or government official. To apply, the applicant must send in an unopened certified transcript of his or her high school grades along with a detailed description of his or her ancestor's Confederate service demonstrating that the applicant has learned the history surrounding the ancestor's service. Grades are important but the knowledge of the ancestor's service is paramount. The applicant must also show that he or she has been accepted into an institute of higher learning and a statement that the applicant intends to attend said institution. Applications must be received by July 15th of each year in order to be considered. Applications are to be emailed with documentation to commander@mosbfl.org.

Contact Information

| | |
|--------------------------|--|
| Name | |
| Street Address | |
| City, State, Zip Code | |
| Telephone Phone # | |
| Email Address | |
| Parent or Guardians Name | |

Confederate Ancestor Information

| | |
|------------------------------|--|
| Ancestor's Name | |
| Relationship to Ancestor | |
| County/State of Origin | |
| Name of Regiment or Unit | |
| Rank or Position Held | |
| Death Date & Burial Location | |

Along with filling out the Confederate Ancestor information above, a copy of muster roll or pension records will need to be submitted with this application. All other related information regarding his service to the Confederate States of America is welcomed, but not required.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted for this scholarship any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

| | |
|----------------|--|
| Name (printed) | |
| Signature | |
| Date | |