



# Military Order of Stars and Bars

General Patrick R. Cleburne

General Nathan B. Forrest

General Robert E. Lee



## Scholarship Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

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

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Telephone Number: (\_\_\_\_) \_\_\_\_\_-

Email Address: \_\_\_\_\_

Parents/Guardians: \_\_\_\_\_

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### Educational Institutions Attended:

#### High School:

Name: \_\_\_\_\_ Attended From: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ Attended To: \_\_\_\_/\_\_\_\_/\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Graduated: Yes \_\_\_\_\_ No \_\_\_\_\_

Name: \_\_\_\_\_ Attended From: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ Attended To: \_\_\_\_/\_\_\_\_/\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Graduated: Yes \_\_\_\_\_ No \_\_\_\_\_

Name: \_\_\_\_\_ Attended From: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ Attended To: \_\_\_\_/\_\_\_\_/\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Graduated: Yes \_\_\_\_\_ No \_\_\_\_\_

The Military Order of Stars and Bars International Headquarters \* PO Box 1700 \*  
White House, Tennessee 37188-1700



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### Educational Institutions Attended:

College/University

(Two Year, Four Year, Graduate School, etc)

Name: \_\_\_\_\_ Attended From: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ Attended To: \_\_\_\_/\_\_\_\_/\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Graduated: Yes \_\_\_\_\_ No \_\_\_\_\_

Name: \_\_\_\_\_ Attended From: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ Attended To: \_\_\_\_/\_\_\_\_/\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Graduated: Yes \_\_\_\_\_ No \_\_\_\_\_

Name: \_\_\_\_\_ Attended From: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ Attended To: \_\_\_\_/\_\_\_\_/\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Graduated: Yes \_\_\_\_\_ No \_\_\_\_\_

Name: \_\_\_\_\_ Attended From: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ Attended To: \_\_\_\_/\_\_\_\_/\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Graduated: Yes \_\_\_\_\_ No \_\_\_\_\_



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## Scholarship Application

### Financial Aid

Have you applied for financial assistance elsewhere? Yes \_\_\_ No \_\_\_

Have you been awarded other financial aid? Yes \_\_\_ No \_\_\_

*(If YES, list the name of the award, address of the fund/activity, amount or value of the award)*

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### Institution where you plan to attend

Name: \_\_\_\_\_

Accepted by institution: Yes \_\_\_ No \_\_\_ Enrollment Date: \_\_\_\_\_

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### Academic Honors/Awards Received

*(Academic Societies, clubs, offices held, papers/articles published, etc. Applicants are free to attach additional pages and a resume.)*

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## Scholarship Application

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I declare that all the information provided is true and correct to the best of my knowledge.

I have read and understand all eligibility requirements.

I understand that the decision of the Scholarship Committee is final.

I give permission to the Military Order of Stars and Bars to verify/investigate all information provided on this application.

Are you a current active MOS&B member? \_\_\_\_\_

If so, please give Membership Number \_\_\_\_\_

Are you a close relative of a current active MOS&B member? \_\_\_\_\_

If so, please give his name and number: \_\_\_\_\_

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\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Date