

United Daughters of the Confederacy®
Judah P. Benjamin Award Application Form

Must Be Printed On legal size UDC white acid free paper available from the Business Office

Submit three applications (original and two photocopies acceptable) with original signatures on each for Chapter award; two applications (original and one photocopy acceptable) with original signatures on each for Division Award. Do not fold applications/proofs. Send applications, proofs, and check to appropriate person at next level. Refer to the Judah P. Benjamin Award Application Form Instruction Sheet and the *UDC Handbook* for additional information.

Name of recipient: _____

Address: _____

City, State, Zip+4: _____

Email: _____ Phone: _____

Mark One: Chapter Award Division Award General Award Proposed Presentation Date: _____

Name & No: of presenting Chapter/CWND: _____

UDC Member? Yes No Confederate Lineage? Yes No

First time recipient (pin & certificate Repeat recipient (certificate only) Date of original bestowal: _____

Pin only – Copy of Certificate must be provided.

Mark the appropriate award category or categories.

Civic Conservation Educational Environmental Humanitarian Patriotic

In the space below, give detailed information, including dates, about the recipient's endeavors/achievements that explain the reason for presentation of the award. Enclose one set of proof to document recipient's endeavors and achievements for each category checked. If more space is needed, use additional sheet.

We, the undersigned officers, approve this application and attest to the following: 1) the recipient has contributed to the historical aims of the UDC; and 2) if a UDC member, the recipient's work has not been accomplished as part of the duties of any office or committee position held.

For Chapter Award Only

Signature of Chapter President Date

Signature of Chapter Officer/Chairman Date

Signature of Division Officer/Chairman Date

For Division Award Only

Signature of Division President Date

Signature of Division/Officer Chairman Date

For General Award Only

Signature of President General Date

For All Awards

Signature of General Committee Chairman Date

Name of Division Officer/Chairman: _____

Address: _____

Email: _____ Phone: _____

Enclosed: Check #: _____ in the amount of \$ _____ payable to: Treasurer General UDC

Date: _____

Pin & Certificate	\$70.00	Certificate Only	\$10.00	Pin Only – Copy of Certificate must be provided	\$70.00
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Ship to: _____

Address: _____

City, State, Zip+4: _____

Email: _____ Phone: _____

Certificate #: _____ Mailed with UDC Ritual by General Chairman on _____