



Missouri State Guard Application

Missouri Department of Defense



Date: _____

PURPOSE FOR INFORMATION REQUESTED

AUTHORITY: CS Congressional Act 42 of February 28, 1861.

PRINCIPAL PURPOSES: To record enlistment into the CSA Missouri State Guard. This information becomes a part of the enlistee's military personnel records which are used to document promotions, reductions, reassignments, training, medical support and other personnel management actions.

ROUTINE : This form becomes a part of the enlistee's Service Master File and Field Personnel File. All uses of this form are internal to the respective service.

DISCLOSURE: Voluntary; however, failure to provide personal identification information you may be denied enlistment.

ENLISTEE IDENTIFICATION DATA

NAME (Last, First, Middle)	Gender (M/F):
VALIDATED IDENTIFICATION : Copy of Drivers License or State I.D.	Commanders Signature:
HOME OF RECORD (Street, City, State)	DATE OF ENLISTMENT
DATE OF BIRTH	Race/Nation of Origin:
Telephone Contact Number:	E-Mail Address
Military Service	Branch: Rank:
Were you in any of these groups: Special Forces: (yes/no)? Ranger: (yes/no)? Navy Seal: (yes/no)? Marine Recon: (yes/no)? AF Para Rescue: (yes/no)?	Your job duties and functions while with one of these groups:

Volunteer Statement

I, _____, understand that I am not enlisting for a set amount of time. Instead, I, as all members of the Confederate States Guard I am a volunteer, and therefore, capable of altering my enlistment status at anytime, in any way I see fit. Furthermore, as a volunteer I acknowledge that I will receive no pay or benefits for my service, but instead have the honor of serving with the most Dedicated, Honorable, and Loyal Military Force on Earth. My Honor Is My Loyalty.



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Service Preference

My preference of service is (Please number any you are interested in by preference.):

Combat Specialties

- Military Police Officer
- Special Forces - Communications Specialist
- Special Forces - Engineer Specialist
- Special Forces - Medical Specialist
- Special Forces - Weapons Specialist
- Cavalry Scout
- Marksman
- Mechanized Infantry
- General Infantry

Combat Support Specialties

- Military Intelligence Specialist
- Criminal Investigations Special Agent
- Ground Surveillance Systems Operator
- Civil Affairs Specialist
- Translator/Interpreter
- Signal/IT Specialist
- Combat Medic
- Transportation Specialist
- Unit Supply Specialist
- Chaplain Assistant
- Chaplain

Support Specialties

- Higher Headquarters & Command
- Intelligence Analyst
- Psychological Operations Specialist
- Human Resources Specialist
- Automated Logistical Specialist
- Quarter Master Officer
- Judge Adjutants General Corp
- Paralegal Specialist
- Administrative Specialist
- Public Affairs Specialist
- Media Specialist

I, _____, am volunteering my service for a period of _____ years.

Date: _____

Applicants Signature

Enlistment Oath

I, _____, do solemnly swear (or affirm) that I will support and defend the State of Missouri and uphold the Constitution of the Confederate States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; and that I will obey the orders of the Confederate States of America National Congress and the orders of the State Governor and the officers appointed over me, according to regulations and the Uniform Code of Military Justice. So help me God.

Date: _____

Applicants Signature