

2024 Application Deadline:
Postmarked by 4/19/2024



The Salvation Army
Pearl Linden Scholarship
2445 Prior Avenue North
Roseville, MN 55113
651-746-3528
www.thesalarmy.org

OFFICE USE ONLY

Date Received: _____
Completed by College: Yes/No

Student's Name: (Last) _____ (First) _____		Date of Birth: ____/____/____	
Address: _____			
City: _____	State: <u>MN</u>	Zip Code: _____	Phone: (____) _____
Social Security Number: _____ - _____ - _____			

This form MUST be filled out and signed by College or University of attendance!

School Attending _____	
Financial Aid Advisor _____	
Tuition and Fees	\$ _____
Books and Supplies	\$ _____
Housing	\$ _____
<u>Total Student Budget</u>	\$ _____
Parental Contribution	\$ _____
Student/Spouse Contribution	\$ _____
<u>Assessed Financial Need</u>	\$ _____
Loans/Work:	Grants/Scholarships:
Perkins Loan \$ _____	Pell Grant \$ _____
Stafford Loan \$ _____	MN State Grant \$ _____
Work Study/Off Campus \$ _____	Scholarship \$ _____
Other: _____ \$ _____	Other: _____ \$ _____
TOTAL PACKAGE \$ _____	
By signing below I am verifying that the information above was completed by me and is based on information specific to our school and the applicants FAFSA application.	
_____ Signature of Financial Aid Advisor	_____ Date

Please remit to:

The Salvation Army Linden Scholarship
2445 Prior Avenue North
Roseville, MN 55113

or by fax to: Attn: Dave Johnson
The Salvation Army Linden Scholarship
651-746-3546