

## The Salvation Army Pearl Linden Scholarship 2445 Prior Ave North Roseville, MN 55113 651-746-3528

## www.thesalarmynorth.org/scholarship

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	For The Salvation Army Office Use Only									
	Applicant ID#; Date	e of all materials received:								
	Application Complet	ed with Applicant's signatures								
	2 Reference Forms	(Received separately)								
	Typed Personal Essa	ay submitted with application								
		lled out by college or university	and submitted w	rith application						
	Official High School	/ PSEO Transcript(s) Received								
APPLICANT INFORMATION										
	Name: (Last)	(First)	(Middle Initial)							
	Permanent Mailing Address: _			Apt #:						
	City:	State: MN	Zip Code:	Mobile: ()						
	U.S. Citizen: Yes No	Permanent U.S. Resident:	Yes No	Other Phone: ()						
	Email Address:									
		s scholarship?								
ب		·								
First		PARENT 1/GUARDIAN INFORMATION								
	Name: (Last)	(First)	(Middle Initial)	Relationship to Applicant:						
	Address	C:t- ··		Chales 7th Cada						
	Address:	City:		State: Zip Code:						
	Day Telephone: ()	Email Address:	Occupation:							
	PARENT 2/GUARDIAN INFORMATION									
	Name: (Last)	(First)	(Middle Initial)	Relationship to Applicant:						
	Address:	City:		State: Zip Code:						
	Day Telephone: ()	Email Address:		Occupation:						
Last		HIGH SCHOOL II	NFORMATION							
	School Name:		Graduation D	Graduation Date (Month & Year):						
	Address (City, State, Zip):			Telephone: ()						

Cumulative GPA: \_\_\_\_\_

Applicant Rank: \_\_\_\_\_ in a class of \_\_\_\_\_ students (#)

		(Use official s	chool names)			
University/College (You	versity/College (You plan to attend): City/State				/Country	
Select School Type: List Additional Universiti	•		Community/Techr	nical College	Other	
Name of School	Locat	ion (City, State, Country)			Dates	
Degree Sought: Bac		iate				
Major/Course of Study:		Expected G	Graduation Date (M	onth & Year)	:	
List all past and curre		VOLUNTEER		ainth grade		
-			inning with the i			
Name of Organization	Location (C	City, State, Zip)		Dates		Hours per wee
	-					
				<del></del>		
		WORK EX	PERIENCE			
List & describe your v	work experien	ce during the past	t 4 years.			
Job Position & Employer	Dates (Inc	lude Month/Year)	Hours/Wee	k	Amour	nt Earned
			<del></del>			
		RRICULAR ACTIVI				
List all extracurricula Note position, specia				s. Do not in	iclude pa	id activities.
Activity	Dates	Hours/Week	Positions / Awa	rds / Honors	/ Offices H	Held
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I understand that the Pearl Linden Scholarship has the following guidelines:

- Must be a High School Senior seeking an undergraduate degree.
- Be a past or current active volunteer in your community.
- Demonstrate Financial Need through the FAFSA form and the Linden Scholarship Financial Aid Form. Further I understand that the Linden Financial Aid Form must be <u>completed</u> and <u>signed</u> by the college of my attendance.
- Preference for Ramsey, Washington and Dakota residents only.

Applicant's Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_



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

**Application Deadline:** 

Postmarked April 19, 2024

STUDENT APPLICATION CHECK LIST					
	Completed application with signatures				
	2 Reference Forms (arriving under separate cover)				
	Typed Personal Essay submitted with application				
	Financial Aid form filled out by college or university and submitted with application (can be multiple schools)				
	Official High School and/or PSEO Transcript(s) included or sent separate				

Submit Application to:

The Salvation Army Pearl Linden Scholarship

Attn: Dave Johnson

Scan and email: dave.johnson@usc.salvationarmy.org

Or mail: 2445 Prior Avenue North Roseville MN 55113

Or Fax: 651-746-3546