



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

**2026 Application Deadline:
 Postmarked by 4/17/2026**

www.thesalarmynorth.org/scholarship

For The Salvation Army Office Use Only

- Applicant ID#; Date of all materials received:
- Application Completed with Applicant's signatures
- 2 Reference Forms (Received separately)
- Typed Personal Essay submitted with application
- Financial Aid form filled out by college or university and submitted with application
- Official High School / PSEO Transcript(s) Received

APPLICANT INFORMATION

Name: (Last) _____ (First) _____ (Middle Initial) _____ Date of Birth: ____/____/____

Permanent Mailing Address: _____ Apt #: _____

City: _____ State: MN Zip Code: _____ Mobile: (____) _____

U.S. Citizen: Yes No Permanent U.S. Resident: Yes No Where d scholars Other Phone: _____ (____) _____

Email Address: _____

PARENT 1/GUARDIAN INFORMATION

Name: (Last) _____ (First) _____ (Middle Initial) _____ Relationship to Applicant: _____

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: _____

HIGH SCHOOL INFORMATION

School Name: _____ Graduation Date (Month & Year): _____

Address (City, State, Zip): _____ Telephone: (____) _____

Cumulative GPA: _____

College:

First

Last

Name:

Current GPA: _____

Applicant Rank: _____ in a class of _____ students
(#) _____

POST SECONDARY SCHOOL INFORMATION
(Use official school names)

University/College (You plan to attend): _____ City/State/Country _____

Select School Type: 4 year University/College 2 year Community/Technical College Other _____

List Additional Universities/Colleges (Or if Undecided):

Name of School	Location (City, State, Country)	Dates
_____	_____	_____
_____	_____	_____

Degree Sought: Bachelor Associate Certificate Other _____

Major/Course of Study: _____ Expected Graduation Date (Month & Year): _____

VOLUNTEER EXPERIENCE

List all past and current active volunteer service beginning with the ninth grade.

Name of Organization	Location (City, State, Zip)	Dates	Hours per week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

WORK EXPERIENCE

List & describe your work experience during the past 4 years.

Job Position & Employer	Dates (Include Month/Year)	Hours/Week	Amount Earned
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EXTRACURRICULAR ACTIVITIES / AWARDS & HONORS

List all extracurricular and community activities from the past 4 years. Do not include paid activities. Note position, special awards, honors, and offices held.

Activity	Dates	Hours/Week	Positions / Awards / Honors / Offices Held
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Share and describe any academic honors, awards, and/or recognition you have received during your time in high school.

College:

First

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SCHOLARSHIP AWARDS & GRANTS

List the name and annual amount of any scholarships or grants you have been awarded for the coming school year only.

Scholarship Award/Grant Name	Amount \$	Applicable to all schools (Yes/No)	Circle One:
_____	_____	_____	Granted / Pending
_____	_____	_____	Granted / Pending
_____	_____	_____	Granted / Pending

GOALS & ASPIRATIONS

Make a brief statement or summary of your plans as they relate to your educational, career objectives, and long-term goals.

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PERSONAL ESSAY

On a separate sheet of paper, please write a 250-500 word typed essay answering the following question:

**What impact has volunteering had on your life and your leadership skills?
Explain and use examples.**

TRANSCRIPT INFORMATION

A complete official high school transcript of grades must be sent with this application or noted to be sent separate.

Students currently or previously enrolled in PSEO must ALSO include all college transcripts from each school attended.

ity for selecting recipients based on criteria set forth in the program’s description. This application becomes the property of The Salvation Army.

I acknowledge decisions are final. I certify I meet the eligibility requirements of the scholarship program as described in the guidelines and the information provides is complete and accurate to the best of my knowledge. If requested, I will provide proof of information, including a copy of my U.S. Income Tax Return. Falsification of information may result in termination of any award granted. I agree my contact information may be released to The Salvation Army Northern Division.

Applicant’s Signature: _____ Date: _____
Please retain a copy for your records.

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 completed and signed by the college of my attendance.

- Preference for Ramsey, Washington and Dakota residents only.

Applicant's Signature: _____ **Date:** _____



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Pearl Linden Scholarship
2445 Prior Ave North
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651-746-3528
www.thesalarmy.org**

Application Deadline:
Postmarked April 17, 2026

STUDENT APPLICATION CHECK LIST

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Completed application with signatures |
| <input type="checkbox"/> | 2 Reference Forms (arriving under separate cover) |
| <input type="checkbox"/> | Typed Personal Essay submitted with application |
| <input type="checkbox"/> | Financial Aid form filled out by college or university and submitted with application (can be multiple schools) |
| <input type="checkbox"/> | Official High School and/or PSEO Transcript(s) included or sent separate |

Submit Application to:

The Salvation Army Linden Scholarship
Attn: Dave Johnson
2445 Prior Avenue North
Roseville, MN 55113

Scan and email to:

dave.johnson@usc.salvationarmy.org

or fax to:

The Salvation Army Linden Scholarship
Attn: Dave Johnson
651-746-3546