

2010 Application Deadline:
Postmarked by 4/15/2010

The Salvation Army
Pearl Linden Scholarship
2445 Prior Ave North
Roseville, MN 55113
651-746-3488 fax
www.thesalv.army.org



OFFICE USE ONLY
Date Received: _____

Student's Name: (Last) _____ (First) _____ Date of Birth: ____/____/____
Address: _____
City: _____ State: MN Zip Code: _____ Phone: (____) _____

References MUST be two adults that are not related to you!
(Examples: teacher, work supervisor, mentor)

RELATIONSHIP

How long have you known the applicant? _____ Are you related to this applicant? _____
In what capacity do you know the applicant? _____

VOLUNTEER SERVICE

Is this applicant an active volunteer in his or her community? _____
How are you aware of his or her volunteer service? _____
Has the applicant indicated to you an interest in volunteering for a worthy non-profit agency and/or church beyond college graduation? _____

PERSONALITY

Please indicate your impression of the above named applicant in the following areas:

Character: _____

Integrity: _____

Potential of this person: _____

Reason you fell this applicant is deserving of this award: _____

Signed: _____ Date: _____

Please mail or fax to Geen Mui by 4/15/2010
Linden Scholarship
2445 Prior Ave North
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