THE SALVATION ARMY
Salisbury, Maryland
Paul W. Morris Memorial Scholarship Fund
Application

NAME_____

SCHOOL_____ HOME PHONE_____

HOME ADDRESS_____

1. What college or university do you plan to attend?

_____

2. Have you been accepted? _____
3. What will be your major? _____
4. Will you need financial help in order to attend? _____
5. List your family income and reason(s) you need scholarship assistance.

_____

_____

_____

(Attach additional pages, if necessary.)

6. List any extracurricular activities in which you have been involved, indicating length of time and offices held:

Student Government_____
Athletics_____
Clubs_____
Other_____

_____

7. List the names and addresses of three responsible people who may attest to your seriousness of purpose and general moral and civic responsibilities.

_____

_____

_____

8. Parent's Occupation: Father_____
Mother_____

9. Submit with this application a transcript of your high school records to The Salvation Army Advisory Council by April 10nd, 2014

10. _____ _____
Applicant's Signature Parent of Guardian's Signature

_____ _____
Date Date