

THE SALVATION ARMY  
Southern Territorial Headquarters  
ERNEST FRANK TRUST



Type or Print Please

SCHOOL YEAR APPLYING FOR: \_\_\_\_\_

Full Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_  
(Where Approved Application/Check will be sent)

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Married: \_\_\_\_\_ Present Age: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name of School: \_\_\_\_\_

Major: \_\_\_\_\_

School Address: \_\_\_\_\_

Estimated Graduation Date: \_\_\_\_\_

Is this college accredited? \_\_\_\_\_

Is this a 4-year college? \_\_\_\_\_

Freshman: \_\_\_\_\_  
(1<sup>st</sup> Year)

Sophomore: \_\_\_\_\_  
(2<sup>nd</sup> Year)

Junior: \_\_\_\_\_  
(3<sup>rd</sup> Year)

Senior: \_\_\_\_\_  
(4<sup>th</sup> Year)

Are grades attached \_\_\_\_\_ or Faxed \_\_\_\_\_

Please attach the most recent grades reflecting the Cumulative GPA. If you are a freshman please attach your senior grades from High School reflecting all semesters. Applications with no grades attached will not be processed.

Do you have plans to enter The Salvation Army College for Officers Training? \_\_\_\_\_

What Corps do you attend? \_\_\_\_\_

What are your academic and career aims? \_\_\_\_\_

Name of Parent(s)? \_\_\_\_\_

By signing below you acknowledge that you understand and comply with the following requirements of the Ernest Frank Trust:

1. Acceptance at an Accredited Academic or Vocational College.
2. You must carry a full-time study program each semester, so that you will graduate in four (4) years.
3. You must maintain a 2.0 Cumulative Grade Point Average or above during the entire school term.
4. You must forward your transcript by the due date set forth by The School for Continuing Education and immediately upon completion of your class.
5. You must reply promptly to any request for information from The School for Continuing Education.
6. If you decide to transfer to another college, you must notify us before you make a transfer.
7. All grants are on an annual basis; however it is our intention to continue such grants until your undergraduate work is complete, provided of course that you have met the above requirements.
8. Attach a small photograph to this application.
9. Attach your latest grades (including HS CGPA).
10. Written confirmation from the Corps Officer endorsing Financial Need.

I do understand and I will comply with the above requirements.

Applicant's Signature \_\_\_\_\_

Date: \_\_\_\_\_

Commanding Officer's Signature \_\_\_\_\_

Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_

**TENTATIVE BUDGET WORKSHEET**  
**College Year Fall 20\_\_\_\_\_ to Spring 20\_\_\_\_\_**

**INCOME**

FROM PARENTS/LEGAL GUARDIAN: \_\_\_\_\_  
OFFICER CHILD SCHOLARSHIP/GRANT: \_\_\_\_\_  
SAVINGS: \_\_\_\_\_  
EMPLOYMENT SCHOLARSHIPS: \_\_\_\_\_  
OTHER LOANS, SCHOLARSHIPS, OR INCOME: \_\_\_\_\_  
THE AMOUNT OF THIS SCHOLARSHIP: \_\_\_\_\_  
TOTAL: \_\_\_\_\_

**EXPENSE**

TUITION: \_\_\_\_\_  
BOOKS/SUPPLIES: \_\_\_\_\_  
ROOM & BOARD: \_\_\_\_\_  
MEDICAL & DENTAL: \_\_\_\_\_  
TRAVEL: \_\_\_\_\_  
INSURANCE: \_\_\_\_\_  
OTHER EXPENSES (SPECIFY): \_\_\_\_\_  
TOTAL: \_\_\_\_\_

I do understand and I will comply with the above requirements.

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

Commanding Officer's Signature \_\_\_\_\_ Date: \_\_\_\_\_

DIVISIONAL FINANCE BOARD STAMP

EDUCATION COUNCIL STAMP

BOARD OF TRUSTEES STAMP