

**THE I. MAGNIN SCHOLARSHIP FUND
OF THE SAN FRANCISCO FOUNDATION**

Scholarship Announcement and Application Instructions

* This scholarship fund has been established to honor the memory of I. Magnin & Co., a pioneer in fashion retailing from 1876 to 1995, and to further the education of students who are pursuing careers in the retail industry. This scholarship fund also recognizes the original charter of the Magnin Aid Foundation in assisting students who are facing financial challenges in meeting their educational goals. Scholarships will range from \$200 up to \$2000 as determined by the Scholarship Committee.

ELIGIBILITY:

1. Student must be majoring in Fashion Merchandising or Design, or other related retail based program, such as Finance.
2. Student must be in a 2-year or 4-year degree program at an accredited college/university.
3. Student ideally should have worked in the retail industry, or have Fashion experience.
4. Student must have a minimum GPA of 2.5.
5. Student must maintain an average of 6 units or 2 classes per semester/quarter.

CRITERIA FOR EVALUATION:

- Scholarship application and required supporting documents
- Professional and Personal Characteristics
- Potential contribution to the field of Retail and Fashion
- Special Talents or Aptitudes
- Financial Need (If you live with your parents, include their income and number of dependents; if you are self-supporting, list your resources, income from jobs, grants, loans. List your anticipated expenses. What proportion of the total expenses is your responsibility?)

REQUIRED MATERIALS:

- One copy of clearly completed and signed application form
- One official transcript of scholastic record from your current/most recent college or institution attended
- Short essay on reasons why you are applying for the scholarship/why you should receive it (Attachment 1)
- Statement of extra curricular and/or community activities, and work experience (Atts. II and III)
- Statement of financial need (if applicable, include copy of most recent financial aid award letter, or copy of most recent W-2 form.)
- Two letters of recommendation and completed evaluation forms from an academic instructor, administrator and/or an employer (Attachments IV and V)

DEADLINE TO APPLY: For Spring scholarships, October 1, for Fall scholarships, March 1

SEND APPLICATION TO: The I.Magnin Scholarship Committee of The San Francisco Foundation,
225 Bush Street, Suite 500, San Francisco, CA 94104-4224

Late or incomplete applications will not be considered. Recipients must reply in writing to the I. Magnin Scholarship Committee to verify eligibility and acceptance of the award. The award must be claimed by submitting a copy of your current college/university registration, no later than August 1st (or as soon as available) of the year awarded for Fall scholarships, and no later than January 1st (or as soon as available) for Spring scholarships.

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Scholarship Application

Please complete application thoroughly and sign it before submitting. Print legibly.

Name (First/MI/Last) _____ Social Security #: ____-____-_____

Mailing Address: _____ City/State/ZIP: _____

Daytime Telephone: () _____ Evening Telephone: () _____

Email: _____ Fax: () _____

College or University attending: _____ Year of study: _____
(freshman, sophomore, etc.)

Major area of study: _____ GPA: _____

Period of time scholarship will cover (ie, Fall 2002 semester): _____

Have you received other scholarship assistance or financial aid for this application period? _____ amount? _____

DOCUMENTS NECESSARY TO COMPLETE THIS APPLICATION:

- Transcript of academic record
- Essay (*Attachment I*)
- Statement of extra curricular/community activities (*Attachment II*)
- Statement of work experience (*Attachment III*)
- Evidence of financial need (*If you live with your parents, include their income and number of dependents; if you are self-supporting, list your resources, income from jobs, grants, loans. List your anticipated expenses. What proportion of total expenses is your responsibility?*)
- Two letters of recommendation (*to be mailed directly to the I. Magnin Scholarship Committee*)
- Evaluation forms (*Attachments IV and V*) (*to be mailed directly to the I. Magnin Scholarship Committee*)

STUDENT CERTIFICATION:

I certify that the information contained in this application form is true and accurate. I understand and agree that any misrepresentation or omission of facts will justify a rejection of the application or revocation of the scholarship award.

Signature _____ Date _____

SUBMIT APPLICATION AND ALL NECESSARY DOCUMENTS* TO: I. Magnin Scholarship Committee, of The San Francisco Foundation, 225 Bush Street, Suite 500, San Francisco, CA 94104-4224

*Documents will not be returned. Send copies of all supporting documents and not the originals. Due to the volume of requests, it is not possible for us to respond to telephone or mail inquiries regarding status of application. All applicants will be notified in writing when scholarship awards are finalized.

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ATTACHMENT III: EMPLOYMENT RECORD

Applicant Name: _____

EMPLOYMENT RECORD

Employer: _____	Dates of Employment: _____ to _____
Address: _____	Position: _____
City, State & Zip Code: _____	Rate of pay: _____
Duties and Responsibilities (include any special projects undertaken, accomplishments or major contributions): _____ _____	

Employer: _____	Dates of Employment: _____ to _____
Address: _____	Position: _____
City, State & Zip Code: _____	Rate of pay: _____
Duties and Responsibilities (include any special projects undertaken, accomplishments or major contributions): _____ _____	

Employer: _____	Dates of Employment: _____ to _____
Address: _____	Position: _____
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ATTACHMENT IV: ACADEMIC LETTER OF RECOMMENDATION

Applicant Name: _____

To the Applicant: Please include your name above and give this form, and a pre-addressed envelope to the individual who will write your academic recommendation.

Reference Name: _____ Title: _____

Address: _____

Telephone: (_____) _____ Signature: _____

To the Academic Reference: The information you are providing concerning the above-named applicant is an important part of the scholarship program's review process. The program awards scholarships to undergraduate students pursuing retail/fashion careers who have demonstrated academic achievement, show professional promise and require financial assistance to accomplish educational goals.

Your time and consideration in furnishing the information is greatly appreciated. The letter of recommendation is confidential. Please return the completed recommendation letter in the envelope provided. The deadline for receipt of application materials for Spring scholarships is October 1, for Fall scholarships, March 1.

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ATTACHMENT IV: ACADEMIC LETTER OF RECOMMENDATION (PAGE 2)

Applicant Name: _____

On this scale, please rate this student relative to his/her classmates:

	<u>Outstanding</u>	<u>Above Average</u>	<u>Average</u>
Academic Performance	_____	_____	_____
Creativity/Originality	_____	_____	_____
Dedication/Interest	_____	_____	_____

Please answer the following questions:

1) How long have you known the student and in what capacity?

2) What characteristics or attributes best describe the student?

Some suggested characteristics, not limited to these categories:

Personal and professional characteristics: Such as, professional appearance, ability to work with others, professional competence, participation in professional activities and organizations.

Experience: Such as success in professional positions, variety in professional responsibilities, extent of leadership, preparation for advanced study.

Special attributes: Such as creative potential, perseverance and drive, reliability and cooperation, ability to identify significant problems, organization skills, clear and concise written skills, ability to speak persuasively. Attach another sheet if necessary.

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ATTACHMENT IV: ACADEMIC LETTER OF RECOMMENDATION (PAGE 3)

Applicant Name: _____

3) What is your assessment of the student's academic potential, and do you see the student achieving her/his educational goals?

4) Do you believe this student should receive this scholarship? Why?

When completed, mail to:

I. MAGNIN SCHOLARSHIP COMMITTEE
OF THE SAN FRANCISCO FOUNDATION
225 Bush Street, Suite 500
San Francisco, CA 94104-4224

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ATTACHMENT V: PROFESSIONAL LETTER OF RECOMMENDATION (PAGE 2)

Applicant Name: _____

3) What is your assessment of the student's academic potential, and do you see the student achieving her/his educational goals?

4) Do you believe this student should receive this scholarship? Why?

When completed, mail to:

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