

The I. Magnin Scholarship Fund

Scholarship Application Instructions

About the Scholarship

This scholarship fund was 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 education goals. Scholarships will range from \$200 up to \$5,000 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 must have a minimum GPA of 2.5.
4. 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 and aptitudes
- Financial need

Application Requirements

Competitive candidates must submit the following:

- **Application form** - completed and signed.
- **Transcript of academic record** - one official transcript of scholastic record from your current/most recent college or institution attended.
- **Essay** (Attachment I) - short essay on reasons why you are applying for the scholarship/why you should receive it.
- **Statement of extracurricular/ community activities** (Attachment II)
- **Statement of work experience** (Attachment III)
- **Statement 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? If applicable, include copy of most recent financial aid award letter, or copy of most recent W2 from.

- **One letter of recommendation** (Attachment IV) - to be emailed directly to Mayra Roman at mroman@sff.org.

Deadline to Apply:

- For Spring Scholarships – **October 1**
- For Fall Scholarships – **April 15**

Submit Application to:

Please submit all required documents via email to:

Mayra Roman
Associate Philanthropic Advisor
San Francisco Foundation
mroman@sff.org
(415) 635-3356

Due to the volume of requests, it is not possible for us to respond to all telephone or email inquiries regarding status of the application. All applicants will be notified via email when scholarship awards are finalized.

The I. Magnin Scholarship Fund

Application Form

Please complete and sign application before submitting. Incomplete applications will not be considered.

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

Mailing Address: _____ City/State/Zip: _____

Cell Phone: _____ Email: _____

College or University attending: _____ Year of Study: _____

Major area of study: _____ GPA: _____

Period of Time scholarship will cover (Spring or Fall): _____

Have you received other scholarships or financial aid for this application period? _____ Amount? _____

Documents Necessary to Complete this Application:

- ✓ **Application form**
- ✓ **Transcript of academic record**
- ✓ **Essay** (Attachment I)
- ✓ **Statement of extracurricular/ community activities** (Attachment II)
- ✓ **Statement of work experience** (Attachment III)
- ✓ **Statement of financial need**
- ✓ **One letter of recommendation** (Attachment IV)

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: _____

The I. Magnin Scholarship Fund

Attachment I: Essay

Applicant Name: _____

Essay: 500 words or less. Please address the following areas (attach additional pages if necessary):

- Please state why you are applying for the scholarship.
- Why should you be selected to receive it?
- Please describe in detail how the scholarship monies will be used.
- How will you apply the knowledge and skills acquired through your course of study toward a profession in the retail/fashion industry?
- Describe your future career plans.

The I. Magnin Scholarship Fund

Attachment II: Extracurricular Activities / Community Involvement

Applicant Name: _____

Name of organization(s)	Type of involvement	Time of involvement

*Not a requirement for scholarship consideration

The I. Magnin Scholarship Fund

Attachment III: Work Experience

Applicant Name: _____

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

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

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

Employer: _____ Date of Employment: _____ to _____
Address: _____ City/State/Zip: _____
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Duties and Responsibilities (include any special projects undertaken, accomplishments or major contributions): _____

The I. Magnin Scholarship Fund

Attachment IV: Letter of Recommendation (page 1)

Applicant Name: _____

To the applicant: Please include your name above and give this form to the individual who will write your academic recommendation.

Reference Name: _____ Title: _____

Address: _____ Phone: _____

Signature: _____

To the 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 email the completed recommendation letter to the contact below. The deadline for receipt of application materials for **Spring** scholarships is **October 1**, for **Fall** scholarships is **April 15**.

Mayra Roman
Associate Philanthropic Advisor
San Francisco Foundation
mroman@sff.org
(415) 635-3356

The I. Magnin Scholarship Fund

Attachment IV: Letter of Recommendation (page 2)

Applicant Name: _____

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

2.) What characteristics or attributes best describe the student?

The I. Magnin Scholarship Fund

Attachment IV: Letter of Recommendation (page 3)

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

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

When completed, email to: Mayra Roman at mroman@sff.org

Questions? Contact Mayra Roman at mroman@sff.org