



SAM GREENBERG SCHOLARSHIP APPLICATION

The Sam Greenberg Scholarship Fund has enabled dozens of museum store professionals to attend the MSA Retail

Conference & Expo to learn more about their trade and strengthen their skills; thereby enhancing the industry.

Each applicant must meet the following qualifications:

- Have never attended an MSA Retail Conference
- Must certify financial need
- Applicant must be an MSA member in good standing

Applicants will be selected by a special committee and will receive written notification of their selection no later than March 1 of the same year as the MSA Retail Conference.

The amount of the award may vary and is determined by the committee and the balance in the fund.

Responsibilities of recipients:

- Each applicant must attend the full program on the date and location specified for the MSA Retail Conference.
- In case of an applicant being unable to attend the MSA Retail Conference, the award must be returned. The applicant may re-apply at any time to attend a future conference.
- The award is not transferable.
- Applications must be received in the MSA office postmarked no later than Jan. 1 of the conference year.

Incomplete applications will be returned.

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Please type or clearly print all information: (attach additional sheets if necessary)

Name _____

Title _____

Institution _____

Address _____

City _____ State/Province _____ ZIP/Postal code _____

Country _____ Phone _____ Fax _____ E-mail _____



- For which MSA Retail Conference are you applying? _____
- How will attending this program benefit you as an individual? _____
- How will attending this program benefit your institution? _____
- Years in current position _____
- Briefly describe your current responsibilities below, and attach a current résumé. _____

I understand the basis for the award is financial need. I hereby make application to the Sam Greenberg Scholarship Fund based on the inability of my institution to pay for my attendance at the MSA Retail Conference.

Signature of applicant _____ Date _____

As the administrator or director of the above-named institution, I am aware that this application is being based on financial need, and that the award may or may not cover the total cost of attending the conference.

Signature of Museum Administrator or Director _____ Date _____