



Student Internship Application May 29 – July 27, 2007

I. Qualifying Criteria*

Applicant must:

- A. Be a full time student at a **US university**.
- B. Have minimum overall GPA of 2.5 (4.0).
- C. Be enrolled in an apparel specific program for management, engineering, or design/development.
- D. Have senior level status during Fall 2007 term (sophomore level for two year programs) with at least one school semester remaining after the internship.

* Any exceptions to these criteria must be approved by the [TC]² Internship Review Committee.

II. Application Criteria

Students must submit the following:

- A. Application Form (see attached).
- B. Official College University Transcript (no photocopies accepted).
- C. A Faculty recommendation - from the Director of Apparel Programs or from student's major professor or faculty advisor (see attached rating form).
- D. Letter from the student applicant that includes the following (not handwritten - do not exceed two pages):
 - (1) What do you hope to gain from this Internship?
 - (2) Why did you select this area as a career?
 - (3) Why do you feel you should be selected for this program?
 - (4) An objective analysis of your personal strengths and weaknesses.
 - (5) Your perception of the Apparel Industry of the future (minimum one paragraph).

III. Application Deadline

A complete package, with application form, transcript, faculty recommendation, and student letter, must be received by January 19, 2007. Packets missing any items from the Application Criteria listed above will not be considered. All decisions will be made by the AAFA Human Resources Leadership Council Executive Committee, and students will be notified by February 28, 2007.

Send Application to: Leanne Wieczorek
 American Apparel and Footwear Association
 1601 N. Kent Street, Suite 1200
 Arlington, VA 22209

- IV. If the student or faculty advisor has questions regarding the [TC]² internship program, please contact Richard Atwell, [TC]², via telephone at 919.653.3504, email ratwell@tc2.com, or Karen Davis, phone 919.380.2177, email kdavis@tc2.com.

[TC] Student Intern Application

I. Personal Data

Full Name _____
Last First Middle

Permanent Home Address _____
Number Street Apt.

_____ City State Zip

Phone (____) _____ Email _____

Emergency Contact _____
Name Phone Number

Current School Address _____
Number Street Apt.

_____ City State Zip

Phone (____) _____

Sex Female _____ Male _____ **Citizenship** _____

Place of Birth _____ **Date of Birth** _____
City State

Career Objective _____

II. Academic Information

A. Current College/University _____

Number of Quarters/Semesters Completed _____

Accumulated Credit Hours to Date _____

Major _____ Minor _____

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II. Academic Information (continued)

Overall GPA _____ Apparel Major GPA _____

Degree(s) Completed _____

Degree(s) Sought _____

Expected Graduation Date _____

Courses in which you are currently enrolled (include course names):

Favorite Subjects _____

B. Previous College(s)/University _____

Number of Quarters/Semesters completed _____

Major _____ GPA _____

Degree(s) Earned _____

Favorite Subjects _____

C. High School Attended _____

SAT Score _____ Math _____ Verbal _____

ACT Score _____ High School GPA _____

Favorite Subject _____

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III. **Activities and Leadership**

College:

Membership, Activities, Hobbies, Clubs, Honor Societies, Conventions, Awards:

Elected or appointed positions held in these activities:

High School:

Memberships, Activities, Hobbies, Clubs, Honor Societies, Conventions, Awards:

Elected or appointed positions held in these activities:

IV. **Industrial Experience & Service**

Current and Previous Job Information:

Dates of Employment	Name of Company	Job Title & Description	Rate of Pay
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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V. Computer Skills

Familiarity with computer programs – list program name and level of competency in its use:

VI. Future Professional Goals

Long Range _____

Short Range _____

VI. Describe Yourself in Three Words

VII. Faculty Advisor

Name _____

Title _____

Address _____

_____ Zip _____

Phone (____) _____ Email _____

*To the best of my knowledge the information included in this application is valid.

Faculty Advisor Signature

