

Apparel Merchandising Intent to Intern Form for CADS 4930 Internship



Date:	Student Name:			
Cell #:	AU Email Address:			
Indicate the semester and year that you to	ook or plan	to take the follow	ving courses:	
CADS 3850	CADS 5850			
	'ear	ship course.	Semester	Year
Indicate the semester and year that you ex	xpect to cor	mplete your inter	-	
Have you approached any firms? Yes	No	If yes, provide	Semeste their name(s) and loo	
Do you already have a tentative commitm If yes, provide the firm's name and addres			No r the firm supervisor:	
If you have not begun the internship sear (a) The location(s) (i.e., cities, states, or re	· •		search:	
(b) Companies that you know you want to	o approach:	:		
(c) Any other descriptors of the type of in	iternship yo	ou ideally want:		
*All internship placements must be appro- final arrangements to start the internship.	•	Apparel Merchand	lising Internship Coord	linator prior to making
I: (initial each)				
Have read the Apparel Merchandi	ising Underg	graduate Internshi	p Guide.	
Have in my possession or have ma Academic Affairs Office (266 Spidl		ointment to get an	academic credit/gradu	uation check from the
Am aware that final arrangements	s for my inte	ernship must be ap	oproved prior to confir	ming a start date.
Am aware that if I complete my in the UNIV 4AA0-HS1 graduation co	-			
Sign and date (below) and email to Dr. Ann Coordinator, by October 15 of the year pri				chandising Internship
Student's Signature	·		Date	