



Mentor for a Day

Student Application

Email completed form to Alan@novalabel.com or KSassaman@schultzwilliams.com

(Please print clearly)

Name (Last, First, Middle): _____

Permanent address: _____

Phone: _____ Email: _____

Current mailing address (if different from above):

College or University _____

Major: _____ Graduation Yr: _____

What extra curricular activities do you participate in?

Your school has a reputation for having great graduates such as yourself. What makes you stand out from your peers?

Would you be interested in visiting more than one business within a calendar year? Yes No
What days are you available for visits? Mon Tues Wed Thurs Fri

Check your major areas of interest: Creative Account Mgt/Customer Service Sales Brand Mgt
 Production

Release and Authorization

I hereby authorize the Direct Marketing Association of Washington Educational Foundation and its authorized representative(s), bearing this release or copy thereof, to share my information with participating employers.

I understand, also, I am required to abide by all the rules and regulations of the *Mentor*, and the Direct Marketing Association of Washington Educational Foundation's "Mentor for a Day Program".

Student Signature (Full Name)

Full Name (Printed)

Date

Professor Signature (Full Name)

Full Name (Printed)

Date