



IDM

A UNIQUE PROGRAM

Industrial Distribution Management Program Application

Name: _____

Expected Graduation Date: _____

Campus Address: _____

Current College: _____

Current Major: _____

Campus Phone: _____

Current GPA: _____

Permanent Address: _____

Date of Application: _____

Social Security: _____

Permanent Phone: _____

Email: _____

Work Experiences:

Current Employer: _____

Type of Work _____ Hours worked _____

Previous Employer: _____

Type of Work _____ Hours worked _____

Previous Employer: _____

Type of Work _____ Hours worked _____

1. Why are you applying into the IDM Program?

2. Please list any activities you are involved in (Attach a resume to this application):

3. Why have you been successful in your courses or other activities in which you have been involved?

4. The IDM Program has a demanding curriculum and busy activity schedule (meetings, field trips, speakers, etc.). Why do you feel you can successfully handle such an intense program?

5. I understand that I am required and it is my responsibility to obtain an internship in supply chain management to fulfill the course requirements of BA 294 (The IDM program will support and assist all students in obtaining an internship)

YES

NO

6. I understand in order to remain in the IDM Program, I must maintain a GPA of at least 3.0/4.0 or better.

YES

NO

Signature: _____

Date _____