



# Student Membership Application

Please fill out each answer clearly and completely on this application.  
If an answer does not apply to you, please mark it with "NA."

Last Name

First Name

Middle Initial

Current Physical Address

City

State

Zip Code

Home Phone #

Cell Phone #

Email Address

## Education Information

Name of University currently attending: \_\_\_\_\_ City/State \_\_\_\_\_

What is your major? \_\_\_\_\_ What is your minor? \_\_\_\_\_

What is your anticipated graduation date? (mm/yyyy) \_\_\_\_\_

When did you enter college? (mm/yyyy) \_\_\_\_\_ How many hours of coursework have you completed? \_\_\_\_\_

What is your current cumulative GPA? \_\_\_\_\_

If you would like to attach a resume to the application to discuss any work experience, please do so. The absence of work experience will not hurt your application for student membership.

## Activities/Honors/Awards

Please list all activities you have or previously have been involved in:

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Please list all honors or awards you have received:

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## Student Member Commitment

I have read and understand the benefits and responsibilities of a student member of the Fashion Group International, Houston Chapter. If selected, I agree to fulfill all of these responsibilities, and I understand that the Student Membership Chair will review my membership each semester. During my membership, if chosen, it is my responsibility to contact the Student Membership Chair to schedule a meeting for my review and pay my dues by the third Friday in January, and the third Friday in August. I understand that I can lose my student membership for the current semester any one of the following circumstances occur:

1. My cumulative GPA falls below a 3.25.
2. I am not currently enrolled in 12 semester credit hours.
3. I do not fulfill all of the responsibilities of a student member.
4. I do not schedule my review meeting with the Student Membership Chair and pay my dues.

I understand that if I lose my student membership, I will have to reapply the following semester.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_