

Canadian Experience Record Book: Experience Summary Form

Steps to Follow

Carefully read all instructions.

The Experience Summary Form is to be submitted for each 900 to 1000 hours of work experience or for each change of employment. Complete this form either by printing neatly in ink or electronically.

Ensure that all pages of the form are initialed by your Supervising Architect.

Ensure that changes or whiteouts are initialed by your Supervising Architect.

Ensure that all additional pages annexed to this form are also signed by your Supervising Architect.

Ensure that all Declarations are signed and dated.

Submit a hard copy of the form bearing original signatures to your CALA jurisdiction for review.

Retain a copy of this form for your records.

Intern Identification

Surname First Name Middle Name(s)

No. and Street Suite No.

City Province/State/Territory Country

Postal/Zip Code Res. Tel. Bus. Tel. Email

Employer Identification

Name of Practice

No. and Street Suite No.

City Province/State/Territory Country

Postal/Zip Code Bus. Tel. Email

Nature of Employer's Activities

Experience Supervisor Position

Mentor Identification

Surname First Name Res. Tel.

Name of Practice Bus. Tel.

Provincial Association Use Only

Received:

By: _____
Date: _____

Reviewed:

By: _____
Date: _____

Experience Period From
To

DAY	MONTH	YEAR

Full Time Experience Click on appropriate box

Part Time Experience Click on appropriate box

Role of Intern

The Intern must identify their specific activities for each project identified on page 4 Summary of Project(s). (Submit additional pages, if required)

Project(s)

Empty box for project details.

Summary of Experience

Record the total hours carried out on projects described on Page 4

A Design/Construction Documents

	1	2	3	4	5	6	7	8	9	10	TOTALS
1 Programming											
2 Site Analysis											
3 Schematic Design											
4 Engineering System Coordination											
5 Building Cost Analysis											
6 Code Research											
7 Design Development											
8 Construction Documents											
9 Specifications and Material Research*											
10 Document Checking and Coordination*											
Subtotal											

* may occur in multiple phases of a project

B Construction Administration

	1	2	3	4	5	6	7	8	9	10	TOTALS
11 Bidding and Contract Negotiation											
12 Construction Phase - Office											
13 Construction Phase - Site											
Subtotal											

C Management

	1	2	3	4	5	6	7	8	9	10	TOTALS
14 Project Management											
15 Office Management											
Subtotal											

Total Hours of Each Project

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Intern Declaration

I declare that the enclosed information is an accurate record of my architectural experience.

Name (please print)

Signature

Date

Summary of Projects (List the 10 most significant projects in this period)

Project Type: New Construction, Additions, Renovations, etc.

Occupancy: Assembly, Institutional, Industrial, Residential, Commercial.

1	Project Name	Project Type	
	Location	Occupancy	
2	Project Name	Gross Floor Area	
	Location	Budget	
3	Project Name	No. of Storeys	
	Location	Project Type	
4	Project Name	Occupancy	
	Location	Gross Floor Area	
5	Project Name	Budget	
	Location	No. of Storeys	
6	Project Name	Project Type	
	Location	Occupancy	
7	Project Name	Gross Floor Area	
	Location	Budget	
8	Project Name	No. of Storeys	
	Location	Project Type	
9	Project Name	Occupancy	
	Location	Gross Floor Area	
10	Project Name	Budget	
	Location	No. of Storeys	

Comments and Declarations

Comments by Employer

- 1 Comment on the level of responsibility and involvement requested of the Intern and relative level taken and performed by the Intern.

- 2 Comment on the overall attitude/philosophy/professional goals of the Intern as you perceive them.

- 3 Your recommendations for the next (6) months experience.

- 4 Comment on the extent to which the Intern has been exposed to the activities as outlined for each of the categories in which experience has been obtained.

Supervising Architect Declaration

I declare that the preceding information is an accurate summary of the Intern's architectural experience.

Name *(please print)*

Signature

Date

Mentor Declaration

I declare that I have met with the Intern in accordance with IAP.

Name *(please print)*

Signature

Date