



Periodic Assessment Form

To be completed by the Intern Architect and approved by the Regulator with every logbook submission.

NAME OF INTERN ARCHITECT: _____

FOR EXPERIENCE PERIOD FROM _____ **TO** _____
year / month / day year / month / day

INTERN COMMENTS: _____

SUMMARY OF REVIEWED EXPERIENCE

A	Design / Construction Documents	TOTAL HOURS REQUIRED	HOURS FROM LAST PERIOD	HOURS IN THIS PERIOD	TOTAL HOURS TO DATE	TOTAL HOURS REMAINING
1	Programming	80				
2	Site Analysis	80				
3	Schematic Design	120				
4	Engineering Systems Coordination*	120				
5	Building Cost Analysis*	80				
6	Code Research*	120				
7	Design Development	320				
8	Construction Documents	1080				
9	Specifications & Materials Research*	120				
10	Document Checking and Coordination*	80				
	Additional required hours (Part A)	600				
	Subtotal	2800				
B	Construction Administration					
11	Bidding & Contract Negotiation	80				
12	Construction Phase – Office	120				
13	Construction Phase – Site	120				
	Additional required hours (Part B)	240				
	Subtotal	560				
C	Management					
14	Project Management	120				
15	Office Management	80				
	Additional required hours (Part C)	80				
	Subtotal	280				
	Additional required hours (any area)	80				
	TOTAL	3720				

REVIEWED BY: _____ **DATE:** _____

*May occur in multiple phases of a project.

NOTE: Total Hours Required will be considered the minimum number of required hours. Regulators may require additional experience.