

**INTERN IDENTIFICATION**

\_\_\_\_\_  
 Surname First Name Middle Name(s)

Address: \_\_\_\_\_ Suite No. \_\_\_\_\_ City: \_\_\_\_\_

Province/State/Territory \_\_\_\_\_ Country: \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**EMPLOYER IDENTIFICATION**

Practice Name: \_\_\_\_\_

Address: \_\_\_\_\_ Suite No. \_\_\_\_\_ City: \_\_\_\_\_

Country: \_\_\_\_\_ Province/State/Territory \_\_\_\_\_ Postal/Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Nature of Employer’s Activities: \_\_\_\_\_

Experience Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_

**MENTOR IDENTIFICATION**

\_\_\_\_\_  
 Surname First Name Res. Telephone

\_\_\_\_\_  
 Name of Practice Bus. Telephone

**EXPERIENCE PERIOD:**

	Day	Month	Year	
From				Full-time Experience <input type="checkbox"/> Part-time Experience <input type="checkbox"/>
To				

*Provincial/Territorial Association Use only:*

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

**Steps to follow:**

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 initialled by your Supervising Architect.

Ensure all **changes** or **whiteouts** are initialled 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 ROAC jurisdiction for review

Retain a copy of this form for your records.

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**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)

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Project(s):

**Summary of Projects** (Add additional sheets if more than 10 projects in this period)

*Project Type: New Construction, Additions, Renovations, etc. Occupancy: Assembly, Institutional, Industrial, Residential, Commercial.*

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1. Project Name \_\_\_\_\_ Location: \_\_\_\_\_  
Project Type: \_\_\_\_\_ Occupancy: \_\_\_\_\_ Gross Floor Area: \_\_\_\_\_ Budget: \_\_\_\_\_ No. of Storys: \_\_\_\_\_

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2. Project Name \_\_\_\_\_ Location: \_\_\_\_\_  
Project Type: \_\_\_\_\_ Occupancy: \_\_\_\_\_ Gross Floor Area: \_\_\_\_\_ Budget: \_\_\_\_\_ No. of Storys: \_\_\_\_\_

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3. Project Name \_\_\_\_\_ Location: \_\_\_\_\_  
Project Type: \_\_\_\_\_ Occupancy: \_\_\_\_\_ Gross Floor Area: \_\_\_\_\_ Budget: \_\_\_\_\_ No. of Storys: \_\_\_\_\_

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4. Project Name \_\_\_\_\_ Location: \_\_\_\_\_  
Project Type: \_\_\_\_\_ Occupancy: \_\_\_\_\_ Gross Floor Area: \_\_\_\_\_ Budget: \_\_\_\_\_ No. of Storys: \_\_\_\_\_

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5. Project Name \_\_\_\_\_ Location: \_\_\_\_\_  
Project Type: \_\_\_\_\_ Occupancy: \_\_\_\_\_ Gross Floor Area: \_\_\_\_\_ Budget: \_\_\_\_\_ No. of Storys: \_\_\_\_\_

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6. Project Name \_\_\_\_\_ Location: \_\_\_\_\_  
Project Type: \_\_\_\_\_ Occupancy: \_\_\_\_\_ Gross Floor Area: \_\_\_\_\_ Budget: \_\_\_\_\_ No. of Storys: \_\_\_\_\_

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7. Project Name \_\_\_\_\_ Location: \_\_\_\_\_  
Project Type: \_\_\_\_\_ Occupancy: \_\_\_\_\_ Gross Floor Area: \_\_\_\_\_ Budget: \_\_\_\_\_ No. of Storys: \_\_\_\_\_

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8. Project Name \_\_\_\_\_ Location: \_\_\_\_\_  
Project Type: \_\_\_\_\_ Occupancy: \_\_\_\_\_ Gross Floor Area: \_\_\_\_\_ Budget: \_\_\_\_\_ No. of Storys: \_\_\_\_\_

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9. Project Name \_\_\_\_\_ Location: \_\_\_\_\_  
Project Type: \_\_\_\_\_ Occupancy: \_\_\_\_\_ Gross Floor Area: \_\_\_\_\_ Budget: \_\_\_\_\_ No. of Storys: \_\_\_\_\_

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10. Project Name \_\_\_\_\_ Location: \_\_\_\_\_  
Project Type: \_\_\_\_\_ Occupancy: \_\_\_\_\_ Gross Floor Area: \_\_\_\_\_ Budget: \_\_\_\_\_ No. of Storys: \_\_\_\_\_

**Summary of Experience**

Record the total hours carried out on projects described on Page 3.

**A Design and Construction Documents**

	1	2	3	4	5	6	7	8	9	10	TOTALS
1. Programming											
2. Site and Environmental Analysis											
3. Schematic Design											
4. Engineering Systems Integration											
5. Building Cost Analysis*											
6. Code Research*											
7. Envelope Detailing											
8. Design Development											
9. Construction Documents											
10. Specifications and Material Research *											
11. Document Checking and Coordination *											
12. Energy Literacy/Sustainability											
<b>Subtotal</b>											

\* may occur in multiple phases of a project

**B Construction Administration**

	1	2	3	4	5	6	7	8	9	10	TOTALS
13. Procurement and Contract Award											
14. Construction Phase - Office											
15. Construction Phase - Site											
<b>Subtotal</b>											

**C Management**

	1	2	3	4	5	6	7	8	9	10	TOTALS
16. Management of the Project											
17. Business/Practice Management											
<b>Subtotal</b>											

<b>Total Hours of Each Project</b>											
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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

## 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.

<b>Supervising Architect Declaration</b>	<i>I declare that the preceding information is an accurate summary of the Intern's architectural experience.</i>	
Name <i>(please print)</i>	Signature	Date
<b>Mentor Declaration</b>	<i>I declare that I have met with the Intern in accordance with IAP.</i>	
Name <i>(please print)</i>	Signature	Date