

The Employer is a Registered Architect within the firm or organization who personally supervises and directs the Intern on a daily basis. The Employer regularly assesses the quality of work performed and certifies the Intern's documentation of work experience activity.

Intern Architect's Full Legal Name: _____

Firm Name: _____

Firm Address: _____

Street

City

Province

Postal Code

Phone Number

Fax Number

Email

Supervisor's Name: _____

First Name

Last Name

Province in which Supervisor is registered: _____

I confirm that the above-noted Intern is employed with our Firm and that the Firm shall endeavor to provide the required pre-registration experience in accordance with the Internship in Architecture Program guidelines.

Signature

Date

It is advised that all three parties to the process of internship; the intern architect, Employer and Mentor, become familiar with the "Internship in Architecture Program (IAP)" and the "Guidelines for Mentors and Employers" which provide information to assist Mentors and Employers in fulfilling their responsibilities under the Intern Architects Program. These documents are available upon request from the Alberta Association of Architects.