

# Canadian Experience Record Book: Experience Summary Form

## Steps to Follow

Carefully read all instructions.

Complete this form either by typing, printing neatly in ink or electronically and have the Employer and Mentor complete the Comments and Declaration portion on a hard copy.

Ensure that changes or whiteouts are initialled by your Employer (i.e. Supervisor).

Ensure that all pages of the form are initialled by your Employer (i.e. Supervisor).

Ensure that all additional pages annexed to this form are also signed by your Employer (i.e. Supervisor).

Ensure that all Declarations are signed and dated.

Retain a copy of this form for your records.

Submit the Experience Summary Form to the Provincial Association with which you are enrolled for each 900 to 1000 hours of work experience or for each change of Employment.

## Provincial Association Use only

### Received:

By: \_\_\_\_\_

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

### Reviewed:

By: \_\_\_\_\_

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

## 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		

## Employment Identification

Firm Name								
No. and Street						Suite No.		
City			Province/State/Territory			Country		
Postal/ZipCode			Bus. Tel.			Email		

## Nature of Employer's Activities

Experience Supervisor				Position				
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## Mentor Identification

Surname			First Name			Res. Tel.		
Firm Name						Bus. Tel.		

## Role of Intern (*Describe briefly*)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Experience Period	From	DAY	MONTH	YEAR
To				

Full Time Experience  Click on appropriate box

Part Time Experience  Click on appropriate box

<b>Category of Experience</b>  Click on appropriate boxes	<b>Mandatory</b> <input type="checkbox"/> (Categories A, B, C, D)	<b>Discretionary</b> Related Discipline Postgraduate Study Teaching Research Undergraduate RAIC Syllabus
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**Summary of Experience**      Record the total hours carried out on projects described on Page 3

**A Design/Contract Documents**

	1	2	3	4	5	6	7	8	9	10	Other	SuppEd	TOTALS
1 Programming													
2 Site & Environmental Analysis													
3 Schematic Design													
4 Engineering Systems Coordination													
5 Building Cost Analysis													
6 Code Research													
7 Design Development													
8 Construction Documents													
9 Specifications & Materials Research													
10 Document Checking & Coordination													
<b>Subtotal</b>													

**B Construction Administration**

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

**C Management**

	1	2	3	4	5	6	7	8	9	10	Other	SuppEd	TOTALS
14 Project Management													
15 Office Management													
<b>Subtotal</b>													

**D Related Activities**

16 Professional and Community Services (Total permitted hours = 80)

**Total Hours Each Project (A+B+C+D)**

**E Discretionary (Total permitted hours = 1880)**

17 Related Disciplines		
18 Post Graduate Study/Teaching/Research		
19 Undergraduate Experience		
20 RAIC Syllabus		

Please describe in the white box below nature of items 16, 17 and 18 above:

**Subtotal E**

**Total Hours**

**Intern Declaration**    I declare that the enclosed information is an accurate record of my experience

Signature

Date

**Summary of Projects**

(List the 10 most significant projects in this period)

**Project Type:** new work, addition, renovation, interior design, master planning, etc.

**Occupancy:** assembly, institutional, industrial, residential, commercial, etc.

<b>1</b>	<b>Project Name</b>	<b>Location</b>	<b>Project Type</b>	
	Role of Intern		Occupancy	Gross Floor Area
			Budget	No. of Storeys
<b>2</b>	<b>Project Name</b>	<b>Location</b>	<b>Project Type</b>	
	Role of Intern		Occupancy	Gross Floor Area
			Budget	No. of Storeys
<b>3</b>	<b>Project Name</b>	<b>Location</b>	<b>Project Type</b>	
	Role of Intern		Occupancy	Gross Floor Area
			Budget	No. of Storeys
<b>4</b>	<b>Project Name</b>	<b>Location</b>	<b>Project Type</b>	
	Role of Intern		Occupancy	Gross Floor Area
			Budget	No. of Storeys
<b>5</b>	<b>Project Name</b>	<b>Location</b>	<b>Project Type</b>	
	Role of Intern		Occupancy	Gross Floor Area
			Budget	No. of Storeys
<b>6</b>	<b>Project Name</b>	<b>Location</b>	<b>Project Type</b>	
	Role of Intern		Occupancy	Gross Floor Area
			Budget	No. of Storeys
<b>7</b>	<b>Project Name</b>	<b>Location</b>	<b>Project Type</b>	
	Role of Intern		Occupancy	Gross Floor Area
			Budget	No. of Storeys
<b>8</b>	<b>Project Name</b>	<b>Location</b>	<b>Project Type</b>	
	Role of Intern		Occupancy	Gross Floor Area
			Budget	No. of Storeys
<b>9</b>	<b>Project Name</b>	<b>Location</b>	<b>Project Type</b>	
	Role of Intern		Occupancy	Gross Floor Area
			Budget	No. of Storeys
<b>10</b>	<b>Project Name</b>	<b>Location</b>	<b>Project Type</b>	
	Role of Intern		Occupancy	Gross Floor Area
			Budget	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.

**Employer Declaration** I declare that the preceding information is an accurate summary of the Intern's work experience.

Name *(please print or type)*

Signature

Date

**Mentor Declaration** I declare that I have met with the Intern in accordance with IAP Guideline.

Name *(please print or type)*

Signature

Date