



THE MANITOBA ASSOCIATION OF ARCHITECTS
137 BANNATYNE AVENUE WINNIPEG MANITOBA R3B 0R3
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TO: MAA REGISTRATION BOARD

EMPLOYMENT CONFIRMATION

INTERN'S NAME IN FULL: _____

FIRM NAME: _____

FIRM ADDRESS: _____
STREET ADDRESS

CITY PROVINCE POSTAL CODE

I CONFIRM THAT THE ABOVE-NOTED INTERN IS EMPLOYED WITH OUR/MY FIRM AND THAT THE FIRM SHALL ENDEAVOR TO PROVIDE THE REQUIRED PRE-REGISTRATION EXPERIENCE IN ACCORDANCE WITH THE INTERN PROGRAM GUIDELINES.

NAME OF SUPERVISING ARCHITECT: _____
(PLEASE PRINT)

SIGNATURE

DATE