



THE MANITOBA ASSOCIATION OF ARCHITECTS  
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TO: MAA REGISTRATION BOARD

**MENTOR'S CONFIRMATION**

(For students enrolled in a CACB accredited program at a Canadian university)

STUDENT'S NAME IN FULL:

I AM PLEASED TO ACT AS MENTOR TO THE ABOVE-NOTED STUDENT FOR THE PERIOD OF PRE-GRADUATION, AS REQUIRED, AND SHALL ENDEAVOR TO ACT AS PROFESSIONAL ADVISOR CONDUCTING DISCUSSIONS REGARDING THE PRACTICAL EXPERIENCE AND GENERALLY ASSISTING THE STUDENT IN ACCORDANCE WITH THE INTERN PROGRAM GUIDELINES.

NAME OF MENTOR:

(PLEASE PRINT)

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE