



ARCHITECTURAL INSTITUTE OF BRITISH COLUMBIA

Intern Architect AIBC Proposal: Experience Gained “In-House”

Submission: Please email the completed form to iap@aicbc.ca.

Intern Full Name:

AIBC ID:

Employer:

Employer Type (i.e. government agency, crown corporation, institution, bank, engineering office, developer):

Does the employer have a department or office that deals primarily with architectural design and construction as an “owner”?

Yes No

Supervising Architect Full Name:

Is the Supervising Architect Employed in the same entity above?

Yes No

1.0 Overview of the proposed work experience

2.0 Overview of the Supervising Architect's role in service/projects of the employment entity

Signature of Intern Architect AIBC

Date

****By typing my name into the signature field, I agree that my electronic signature is the legally binding equivalent, and has the same meaning, as my handwritten signature. I will not, at any time in the future, repudiate the meaning of my electronic signature or claim that my electronic signature is not legally binding.***

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