



Application Form: Internship in Architecture Program

APPLICANT: (Please Type or Print)

NAME IN FULL: _____
(Surname) (First Name) (Initial)

HOME ADDRESS: _____
(Street) (City) (Province) (Postal Code)

PREFERRED ADDRESS FOR CORRESPONDENCE: Residence: Business:

HOME TELEPHONE: _____ E-MAIL ADDRESS: _____

GENDER: Male Female

BIRTHDATE (DD/MM/YY): _____

Have you ever been previously enrolled in the program or held another status with the AIBC? (i.e. Student Associate or Graduate Associate)? Yes No

If yes, please provide details: _____

EDUCATION: (Please Type or Print)

SCHOOL	DEGREE (or equivalent)	GRADUATION DATE

CACB #: _____ Certification Date: _____

Are you a member of a professional association? If yes, please provide details: _____

EMPLOYER: (Please attach confirmation letter from your employer)

Name: _____

Firm: _____ Tel: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

MENTOR: (Please attach confirmation letter from your mentor)

Name: _____

Firm: _____ Tel: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

APPLICANT SIGNATURE: _____ **DATE:** _____

INTERN ARCHITECT APPLICATION PACKAGE ENCLOSURES CHECKLIST:

Please ensure the following items are enclosed.

1. Completed & signed application form Yes
2. Photo identification form Yes
3. Undergraduate/architecture diploma(s)
Or Syllabus of Studies diploma (Include a Copy) Yes
4. Graduate/architecture diplomas(s) (copy of diploma) Yes
5. CACB Certification (copy of certificate) Yes
6. Employer Letter Yes
7. Mentor Letter Yes
8. Application and Annual Fees (Fees must be submitted with application;
refer to pro-rated fee schedule) Yes
9. Photocopy application package for your records Yes

Note: Please be sure to notify the AIBC, in writing, of any changes to your contact information (address, e-mail or employer).