



THE MANITOBA ASSOCIATION OF ARCHITECTS
SUITE 101 - 177 AVENUE WINNIPEG MANITOBA R3B 0W5
PH: (204) 925-4620 FAX: (204) 925-4624 EMAIL: info@mbarchitects.org

TO: MAA REGISTRATION BOARD

MENTOR'S CONFIRMATION

(For students enrolled in the RAIC Syllabus Program)

STUDENT'S NAME IN FULL: _____

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

NAME OF MENTOR: _____
(PLEASE PRINT)

SIGNATURE

DATE