



Newfoundland Association of Architects

P. O. Box 5204, St. John's, NL, A1C 5V5
Tel. (709) 726-8550 / Fax (709) 726-1549
Email: naa@warp.nfld.net
Web page: www.newfoundlandarchitects.com

Intern Architect Application

A. Identification

Name of Applicant: _____

Residence Address: _____

Street/P. O. Box #: _____ City: _____

Province: _____ Country: _____ Postal Code: _____

Residence Tel: _____

Date of Birth: (Month) _____ (Day) _____ (Year) _____

Address on Website: Yes/No (if you choose not to have your address published only your name will be included on the listing) _____

B. Education

I am a graduate of _____
(Insert name of University)
with a degree _____ in _____
year

Indicate Canadian Architectural Certification Board (CACB) Certificate Number _____

C. Employer (if currently employed)

Firm Name: _____

Address: _____

Business Tel: _____ Business Fax: _____ Email Address: _____

D. Mentor (Not present employer)

Name: (please print) _____

Firm Name: _____

Address: _____

Business Tel: _____ Business Fax: _____ Email Address: _____

Intern In Architecture Application

Intern in Architecture Membership Dues: $\$120.00 + 13\% \text{ HST } (\$15.60) = \$135.60$

Application Fee: $\$50.00 + 13\% \text{ HST } (\$6.50) = \$56.50$

Total: $\$192.10$

Payment Method	If you are paying by Visa Card please complete the following	
Cheque		
Money Order	Card Number	Expiry Date
Cash		
Visa/Master Card	Name of Card Holder (<i>please print</i>)	Signature

Signature of Applicant:

Date:
