



The Association of Architectural Technologists of Ontario (AATO)
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WORK EXPERIENCE RECORD SUMMARY

Each column to be completed weekly, for the Intern Upgrading Program update.

Period of Employment: From _____ To: _____

Name:		Month:					Month:					Month:				
Address:		Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15
Employer:																
TYPE OF CONSTRUCTION	New Construction															
	Alterations/Additions															
TIME RECORD Report principal weekly employment by X for each type of construction and project type, project size and type of work.	Mercantile															
	Industrial															
	Institutional															
	Residential															
	Other (Specify):															
	Small (Cost below \$200,000)															
	Medium (\$200,000 to \$2,000,000)															
	Large (Cost above \$2,000,000)															
	Preliminary Drawings															
	Working Drawings/Detailing															
	Specifications															
	Checking Shop Drawings															
	Project Management/Administration															
	Other (Specify):															
RESPONSIBILITY RECORD Report significant responsibilities discharged each week by marking O when performed as observer or R when performed as employer's representative	Interview with Client															
	Interview with Consultant															
	Interview with Contractor															
	Attend Job Meeting															
	Interview Municipal Building Dept.															
	Interview Factory Inspector															
	Interview Fire Marshall															
	Participate in Tendering Procedure															
	Field Inspection															
	Prepare Change Order															
	Approve Drawing & Issue Certificate															
	Report Client Interview															
	Report Meeting with Consultant															
	Report Meeting with Authority															
	Report Job Meeting															
Field Report																

Employer's certificate: I certify that the above report is, the best of my knowledge, a true record of the experience gained by the candidate while in this employment.

Date : _____ Print Supervisor's name: _____

Phone # : _____ Signed : _____