

The Manitoba Association of Landscape Architects

Revision – March 2008

Experience Record Book WORKSHEET

This form may be duplicated as required.
Please click and type under each heading or print. Both pages are to be completed.

Candidate Information			
Mr/Ms:	Surname:	First:	Initial:
Candidate's Title:		Candidate's Email:	
Employer:		Employer's Address:	
Supervisor:		Postal Code:	Tel:
Supervisor's Title:		Fax:	
Supervisor's Title:		Supervisor's Email:	

Experience Description	
In consultation with the Professional Advisor, a candidate will complete one description sheet per experience/project. Ensure descriptions are in keeping with the <i>Landscape Architectural Experience Table</i> .	
Name or Title of Experience/Project:	
Location:	Area of Practice:
Role:	Specialization:
Year and Duration of Occurrence:	

Description of Duties Performed

Describe accurately and in detail the work which you have personally done, and indicate your specific degree of responsibility for work which was carried out jointly with others. Additional pages may be added if you require more room.

I declare that the above is a correct record of the candidate's experience for the period shown:

MALA Candidate: _____

Professional Advisor: _____

Supervisor: _____

Date: _____