



Dear Sir or Madam:

Mentor's Confirmation

OAAAS Member Name in Full: _____

I am pleased to act as Mentor to the above-noted Technologist OAAAS during the work experience component of the OAAAS program. I will act as a professional advisor conducting reviews and assessments of the practical experience, and generally will assist the Technologist OAAAS to prepare for licensure in accordance with the Program Guide to become a Licensed Technologist OAA.

Name/Title of Mentor (*please print*)

Signature

Date