



# IATSE LOCAL 891

International Alliance of Theatrical Stage Employees, Moving Picture Technicians, Artists and Allied Crafts of the United States, its Territories and Canada • British Columbia and the Yukon

## Page 1 - PRODUCTION OFFICE DEPARTMENT APPLICATION FORM

### Please indicate which status you are applying for:

PERMITTEE STATUS

SISTER LOCAL STATUS

**For members of IATSE Sister Locals:** A current letter of good standing from your home local is required. Please contact your home local to obtain a current letter of good standing, the letter must provide the date to which your quarterly dues have been paid.

I have attached proof of a current letter of good standing in pdf format from IATSE Local# \_\_\_\_\_.

### Please indicate which positions you are applying to and meet the requirements in the Production Office Department:

1st Assistant Production  
Coordinator

2nd Assistant Production  
Coordinator

Production Office Coordinator

**\*Copies of your resume and required documents (such as certificates, tickets, etc.) must be emailed to [applications@iatse.com](mailto:applications@iatse.com) as attachments along with your completed application. PDF format preferred.**

### Please complete the following details

Name: \_\_\_\_\_  
FIRST MIDDLE LAST

Address: \_\_\_\_\_  
STREET CITY PROVINCE/POSTAL CODE

Providing birthdate and gender information is optional. This is asked for demographics only and will not be used to determine eligibility.

Birthdate: \_\_\_\_\_ day month year Gender: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Website: \_\_\_\_\_

Emergency contact-Optional: Name \_\_\_\_\_ Phone: \_\_\_\_\_

Last 4 digits of Social Insurance #: \_\_\_\_\_

**IATSE LOCAL 891 PERMITTEE AND SISTER LOCAL APPLICATION AGREEMENT – MUST BE SUBMITTED WITH APPLICATION**

1. I, \_\_\_\_\_ acknowledge that I have read and will fully abide by the IATSE Local 891 (the “Local”) Availability and Dispatch Procedures that are located on the Local’s website [here](#). I understand that these procedures are subject to change at the discretion of the Local, and that it is my responsibility to monitor the website to stay apprised of any changes and to abide by them.
2. As a Permittee applicant, or once approved as a Permittee, I agree that I will not accept work within the jurisdiction of the Local without first gaining the Local’s authorization by a valid permit and/or record of Union dispatch. If I am contacted directly by a production, I recognize that it is my responsibility to verify my hiring by contacting the Local’s Dispatch at 604-664-8916. I acknowledge that it is my sole responsibility to ensure that I have been properly dispatched or work permitted by the Union, that repeated infractions of this kind can result in my removal from the Local’s permittee roster, and any unauthorized days worked will not count towards membership requirements.
3. I understand that if permitted or dispatched to accept work I am required to provide the Canadian and Provincial residency information sufficient to ensure that the production company is eligible to receive the federal and provincial incentives including tax credits. This information can be found on the Local’s website at [here](#).
4. I acknowledge and agree that any work I receive as a Permittee applicant or approved Permittee is also subject to the following:
  - Work is as a non-member of the Local and will not create or be counted towards retroactive seniority should I be granted membership in the future;
  - Work is of a very temporary nature, acceptance of such work does not create an entitlement to ongoing or future work, and there is no obligation on the Local to assist or provide future work opportunities as a non-member;
  - There is no guarantee of work; and,
  - The Local has the right to make the final determination of any/all work offered.
5. I acknowledge that my employment will be governed by the terms of the Master Collective Agreement, or other applicable stand-alone Collective Agreement of the Local, and the policies and procedures of the Local. In addition, I understand that I am required to consent to the deduction and remittance of working dues in the amount provided for under the Collective Agreement to the Local.
6. I acknowledge that in completing this application, I am not being offered membership in IATSE Local 891, and that this applicant agreement must be signed before I am entitled to accept any work offered.

**BARGAINING AUTHORIZATION:** In applying, I understand that the Local intends to apply to be certified as my exclusive bargaining agent and to represent me in collective bargaining.

**CONSENT TO THE COLLECTION, USE, DISCLOSURE AND RETENTION OF PERSONAL INFORMATION:** I acknowledge that I have had an opportunity to read and agree to the Applicant Personal Information Policy located on the Local’s website [here](#) and I have had an opportunity to read and agree to the Local’s Privacy Policy located on the Local’s website [here](#).

I certify that all information stated and provided with this application is true and complete to the best of my knowledge. I authorize IATSE Local 891 to verify this information provided in this application. I agree that any intentional misrepresentation on this application could result in the termination of my union status.

**Dated:** \_\_\_\_\_ **Signature** \_\_\_\_\_  
Signature or typed initials providing your acceptance of this agreement



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## Consent to Receive Electronic Communications

This form will confirm that you have consented to receive our electronic communications, including but not limited to our newsletters, production summaries, production reports, notifications with respect to seminars and fundraisers, departmental communications, communications from third parties, and other notifications we send from time to time for the purpose of (i) sharing information; (ii) establishing, developing and/or maintaining our relationship with you; and (iii) in accordance with our strategic objectives.

Please note that the provisions of our Privacy Policy continue to apply.

Please sign and date this consent below to confirm your agreement.

\_\_\_\_\_  
Last 4 digits of S.I.N.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature or typed initial providing your consent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Resource ID number  
(To be added by staff)

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## **FILM & TELEVISION EXPERIENCE - list your film and tv experience below.**

Please note: Work experience may be verified.

Production Title: \_\_\_\_\_ Dates: \_\_\_\_\_

Feature, Television, Video, or Commercial: \_\_\_\_\_

Position/Duties: \_\_\_\_\_

Reference Name and Phone Number: \_\_\_\_\_

Production Title: \_\_\_\_\_ Dates: \_\_\_\_\_

Feature, Television, Video, or Commercial: \_\_\_\_\_

Position/Duties: \_\_\_\_\_

Reference Name and Phone Number: \_\_\_\_\_

Production Title: \_\_\_\_\_ Dates: \_\_\_\_\_

Feature, Television, Video, or Commercial: \_\_\_\_\_

Position/Duties: \_\_\_\_\_

Reference Name and Phone Number: \_\_\_\_\_

Production Title: \_\_\_\_\_ Dates: \_\_\_\_\_

Feature, Television, Video, or Commercial: \_\_\_\_\_

Position/Duties: \_\_\_\_\_

Reference Name and Phone Number: \_\_\_\_\_

Production Title: \_\_\_\_\_ Dates: \_\_\_\_\_

Feature, Television, Video, or Commercial: \_\_\_\_\_

Position/Duties: \_\_\_\_\_

Reference Name and Phone Number: \_\_\_\_\_

RELATED EXPERIENCE/SPECIAL SKILLS:

EDUCATION/TRAINING/CERTIFICATES/LICENSES (please include copies):

**PRODUCTION OFFICE DEPARTMENT QUALIFICATIONS**

To apply for work in the Production Office Department, applicants must possess the following. Please check the qualifications you possess:

Proof (work verification letters) of either a minimum two years professional experience in an administrative capacity in film, television, animation, visual effects, commercial, theatre, music production

**OR** proof of a minimum of two years professional experience in an administrative capacity with preference given to work in entertainment or creative industries **AND** a minimum of one year experience in film with preference given to work in an administrative capacity. ([click here for sample of proof/work verification letter](#)).

*\*For the purpose of calculation: 200 days of film work will be considered one year of work experience.*

Successful completion of Grade 12 English

Strong organizational skills, team player and works well in the production office environment

Attach a resume in pdf format (resume must specify dates, #days worked, job duties, supervisor. etc.)

Completed Production Office Department Self-Evaluation Form (next page)

Attach copies of any related education certificates you may have

Valid Foodsafe Level 1 Certificate (*only required for 2nd Assistant Production Office Coordinator*)

Save your completed application (this document) and submit to [applications@iatse.com](mailto:applications@iatse.com)

Asset:

Valid Occupational First Aid Level 1

Please note: Most positions require employees to report to work at locations that are inaccessible to public transit, therefore it is strongly recommended that you have a valid BC Drivers License and use of a reliable vehicle. Many positions require employees to travel between work locations. Employees using their own vehicles must be able to provide their employer with proof of having Business Class Insurance. *\*Please do not forward copies of your drivers license, as this information is not required for your application.*

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## PRODUCTION OFFICE EVALUATION

Please indicate your familiarity level with the following:

	NONE	SOME	EXTENSIVE
Communication equip. (cell phone, walkies)			
Accommodation/Travel Arrangements			
Contracts - Cast & Crew			
Call Sheets / Sides			
Casting Process			
Crew / Cast / Contact Lists			
Crewing / Daily Calls			
Day Out of Days			
Deal Memos			
Immigration Forms / Work Permits			
Office Setup / Wrap			
One-liners			
Petty Cash Reports			
Production Office Systems			
Production Reports			
Purchase Order Systems			
Script Revisions			
Shipping: Customs Forms			
Shipping: Basic FedEx			
Shipping: Basic UPS			
Shooting Schedules			
Shot Lists			
Telephone & Reception Protocol			
Union Contracts & Regulations			

Distribution (paper & electronic)

Please indicate your familiarity level with the following computer programs:

	NONE	SOME	EXTENSIVE
WORD PROCESSING (WORD, WORDPERFECT)			
DATABASE (ACCESS, FILEMAKER)			
SPREADSHEET (EXCEL, NUMBERS, LOTUS)			
VIRTUAL PRODUCTION OFFICE (ESN, PIX, DAX, SCENECHRONIZE, FASTPEX)			
ADOBE ACROBAT			
SCRIPT PROCESSING(FINAL DRAFT, SCREEN WRITER)			
MICROSOFT OUTLOOK			

List all computer programs you are familiar with:

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Do you have on-the-job experience with:

- What is your typing speed? \_\_\_\_\_ WPM
- Fax Machines / Photocopiers (Types): \_\_\_\_\_
- Computers (Types): \_\_\_\_\_