



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# _____.

SCRIPT COORDINATOR

*Copies of your resume and required documents (such as certificates, tickets, etc.) must be emailed to 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: _____

Last 4 digits of Social Insurance #:

Emergency contact-Optional: Name Phone:

How did you find out about the role with Local 891 you are applying for?

Do you wish to share your pronouns with IATSE Local 891?

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



IATSE | LOCAL
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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):



IATSE LOCAL 891



PRODUCTION OFFICE DEPARTMENT – SCRIPT COORDINATOR

GENERAL DUTIES SCRIPT COORDINATOR

The duties of the Script Coordinator include: Format and proofread the script; input script revisions; check spelling, punctuation and grammar, page numbering and starred changes; maintain a database of all drafts of the script(s); produce and distribute script status reports and script delivery schedules; track delivery of scripts and outlines; notify Accounting Department to facilitate payment of Writers and Story Editors; send scripts and revisions to research company; vet research reports; vet and distribute Network/Studio standards and practices to facilitate compliance; conduct story-related research as assigned by the Writer, Producer, Director or Story Editor; act as Story Department point person liaising with various Production Departments, Producers, Writers and Network/Studio personnel; and in conjunction with the Production Department, ensure the distribution of the script and script revisions to all cast, crew and Network/Studio personnel as required.

***This description is for applicant purposes only. Actual duties may differ from this description.**

REQUIREMENTS

Applicants **MUST** have proof of the following criteria and attach copies of valid certificates and work verification letters (please check mark):

- _____ WHMIS 2015
- _____ Motion Picture Industry Orientation Certificate - www.actsafe.ca.
- _____ Actsafe Motion Picture General Safety Awareness certificate - www.actsafe.ca.

Work experience:

_____ Proof (work verification letters – [click here for sample letter](#)) of either a minimum two years professional experience in an administrative capacity in film, television, animation, visual effects, commercial, theatre, music production, ***including one production with a minimum of 30 days working as Script Coordinator, or performing the duties under a different job title (refer to resume requirements).***

_____ **OR** proof (work verification letters – [click here for sample letter](#)) 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, ***including one production with a minimum of 30 days working as Script Coordinator, or performing the duties under a different job title. (refer to resume requirements).***

_____ Applicant's resume **MUST** include the following:

- Work experience in the capacity as Script Coordinator (including but not limited to Revisions, Formatting, Distribution, Tracking, Clearances, Research), either with that specific job description or as duties assigned
- Working in an office and/or another administrative environment
- Extensive working knowledge of Final Draft or other script formatting software such as Screenwriter, StudioBinder
- Experience with Scenechronize or other encrypted document distribution software such as SetKeeper, ProDicle, POX
- Experience with cloud based digital storage systems such as Box, DAX
- Working Knowledge of Excel software
- Working knowledge of Adobe Acrobat

_____ Applicant MUST provide (work verification letters – [click here for sample letter](#)) indicating work duties pertaining to Script Coordinating

_____ Save your completed application (this document) and submit to applications@iatse.com

SKILLS

If you possess these skills please checkmark:

_____ Ability to collaborate and effectively communicate with Writer, Producer, Director, Assistant Director, Story Editor, Studio/Network personnel, Production Department

_____ Excellent organization, accuracy and attention to detail

_____ Strong written and verbal communication skills

_____ Effective time management skills

_____ Ability to maintain confidentiality and privacy

- _____ Ability to work in a fast-paced environment and meet deadlines, and work independently as required
- _____ Proven research skills
- _____ Strong word processing, database, and spreadsheeting skills
- _____ Maintain professional office etiquette
- _____ Understanding of Production interdepartmental collaboration

ASSETS (Please checkmark if you have):

- _____ Knowledge or experience coordinating Script Clearances
- _____ Administrative experience on Production
- _____ Post secondary education (related certificates, diplomas, degrees)
- _____ Valid OFA level 1

HIGHLY RECOMMENDED TOOLS & EQUIPMENT:

Laptop Computer, Microsoft Suite, Final Draft, Adobe Acrobat

IMPORTANT INFORMATION:

- Each individual employer enforces strict confidentiality and social media policies. Violations of these policies may have adverse consequences for your employment and union status.
- Most employers 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.***

