



LOCAL 669 CAMERA TRAINEE APPLICATION FORM

UNIT 217 - 3823 HENNING DRIVE, BURNABY, BC V5C 6P3
TELEPHONE: (778) 330-1669 EMAIL: CAMERA@IA669.COM

Name _____

Cell _____

Address _____

Home _____

Fax _____

City, Province _____

Postal Code _____

SIN _____

Company Name _____

Citizenship _____

E-Mail Address _____

Date of Birth _____

I am legally entitled to work in Canada and I am a permanent resident within Western Canada. I understand that if I am accepted into the 2nd Assistant Camera Trainee Program with IATSE 669 the Union intends to apply to be certified as my exclusive bargaining agent and to represent me in collective bargaining.

I agree that IATSE 669 may collect, use and disclose the personal information contained in this application form for the purpose of investigating, assessing and processing my application for membership. I specifically consent to the collection use and disclosure of this information for the purposes of obtaining employment or training opportunities in the film industry through IATSE 669.

LIST TWO (2) FILM AND/OR TELEVISION REFERENCES, (NOT RELATIVES), WHO CAN ATTEST TO YOUR INTEGRITY, CHARACTER, AND WORK HABITS:

Name _____

Name _____

Address _____

Address _____

City, Province _____

Postal Code _____

City, Province _____

Postal Code _____

Telephone _____

Telephone _____

Relationship _____

Relationship _____

BEFORE SIGNING, PLEASE CHECKMARK THE FOLLOWING:

- I have read all information on the website, including "Important Questions to Ask Yourself".
- I have included a **letter of intent** addressed to the trainee committee.
- I have included my **resume** of all related experience, education, and union/guild affiliations.
- I have included **photocopies** of the mandatory course certificate cards related to my province.
- I have included **3 letters of reference**.
- I have included a **photocopy of my valid unrestricted Class 5 driver's license** and **proof of vehicle registration and insurance**.
- I am **legally entitled to work in Canada** and have enclosed a photocopy of my **passport / permanent residency status / work permit**.
- All of the above documents are **unstapled and paper clipped** in an **8.5 x 11 envelope**

Signature _____

Date _____