



Motion Picture Studio Production Technicians  
Local 849 of the I.A.T.S.E.

# TRAINEE ENGAGEMENT FORM

(All sections of this form must be completed)

Name of Trainee:		Phone:	
Address:		E-mail:	
City:	Province:	Postal Code:	
Is this trainee already listed as a referral with Local 849?	YES: <input type="checkbox"/>	NO: <input type="checkbox"/>	Year Registered (if known):
Has this trainee completed a Set Etiquette Course?	YES: <input type="checkbox"/>	NO: <input type="checkbox"/>	Date Taken:
<p>I, _____ <i>name of trainee</i> _____ agree to abide by the terms and conditions of the Collective Agreement between _____ <i>name of production company</i> _____ and Local 849 of the I.A.T.S.E. and abide by the Constitution, By-Laws of Local 849 and the Trainee Policy while I am permitted to work within its jurisdiction.</p>			
_____		_____	
<i>Signature of Trainee</i>		<i>Date</i>	

A completed Deal Memo and resume (if not already submitted) must accompany this Trainee Application.

TO BE COMPLETED BY THE PRODUCTION COMPANY	
Production Company:	
Production Title:	
Estimated Start/End Dates:	month      day      year      to      month      day      year
Department:	Name of Key:
_____	_____
<i>Signature of Key/Head of Department</i>	<i>Date</i>
_____	_____
<i>Signature of Producer / Line Producer / Production Manager</i>	<i>Date</i>

TO BE COMPLETED BY IATSE LOCAL 849	
Comments: _____	
_____	
_____	_____
<i>Signature of IATSE Local 849 Business Agent</i>	<i>Date</i>

Please forward completed form to: [admin@iatse849.com](mailto:admin@iatse849.com)  
617 Windmill Road, 2nd Floor, Dartmouth, Nova Scotia, B3B 1B6 | Phone: 902.425.2739