

# **APPLICATION INFORMATION**

Thank you for your interest in ACFC West, Local 2020 Unifor

Please read this entire letter before sending your required application material and administration fee. Anyone planning to work in the film industry should have the ability to relate to others, be a team player, and be very flexible. An overall understanding of how departments relate to each other and a basic knowledge of the industry will also determine acceptance into the union.

#### REQUIREMENTS

- ✓ Completion of a recognized **Motion Picture Industry Orientation** course is required. Include photocopy of certificate. Offered through ACTSAFE: <a href="https://actsafe.ca">https://actsafe.ca</a>
- ✓ WHMIS Certificate (Workplace Hazardous Materials Information System). Include photocopy of certificate. Offered through ACTSAFE as well as other recognized providers.
- √ 60 verifiable days worked on professional made for television productions or feature films, (may vary in some departments) IN THE POSITION YOU ARE APPLYING FOR.
- ✓ Completed application in the department you are applying for.
- ✓ Hand-signed Bargaining Authorization form attached.
- ✓ Current resume <u>detailing the number of days worked on set</u>. Please see attached sample resume.
- ✓ Non-refundable application fee of \$85 payable by cash, cheque, money order, debit or credit card, or e-transfer. To pay with e-transfer use: <a href="mailto:payments@acfcwest.com">payments@acfcwest.com</a> and provide your name and department on the subject line. Application fee for a 2<sup>nd</sup> department is \$25. You may apply for a MAXIMUM of two departments.

For more information, please visit our website at <a href="www.acfcwest.com">www.acfcwest.com</a>. You can also e-mail <a href="applications@acfcwest.com">applications@acfcwest.com</a> or call **604-299-ACFC (2232)**, extension 4535. Applications can be mailed via Canada Post or dropped off to our office at: 108 – 3993 Henning Drive, Burnaby, BC V5C 6P7.

The \$85 fee is **NOT** a guarantee that you will be accepted as a Permittee. Your application will be reviewed once all criteria are met. Should your application not be approved, you will be able to request re-application in the same department at a later date without charge.

Applications are submitted to the Council at any Council meeting (usually once per month). You will be informed in writing or by phone after your application has been reviewed.

#### RETAIN THIS COPY FOR YOUR RECORDS





# **HAIRDRESSER APPLICATION**

HAIR STYLIST *Please mark one	ASSISTANT HAIRDRESSER	2ND ASSISTANT HAIRDRESSER		
Please submit a pho Applicants must wri	otocopy, should you hold a valid Hair ite and pass our Hair exam.	r License or equivalent.		
NAME:				
ADDRESS:				
ADDRESS:	POSTAL (	CODE		
PHONE:	CELL:	FAX:		
E-MAIL:				
I do this  DAY  Membership in ACF	day of MONTH (Please Spell)	rther agree that I will accept and fully observe		
A one-time \$85 <b>Non-Refundable Administration Fee</b> , payable by cash, cheque, money order, or Mastercard, Visa or debit, must be submitted with your department application (including additional criteria), original Bargaining Authorization, proof of WHMIS, Motion Picture Industry Orientation Course, and resume.				
☐ CASH	□ сн	HEQUE #:		
☐ MASTERCARD	/VISA/DEBIT CARD REC	CEIPT #:		
SIGNATURE:				
WITNESS:				



# HAIR DEPARTMENT

(please provide p	s Licence No. (or equivolotocopy) Licence:				
Training: Name of	School:		City:		
Advanced Training: Course:			City:		
Course: _			City:		
<u>Last Major Salon</u> Place: _	Job:	·	Date:		
FILM EXPERIEN	ICE:				
Dates Worked	Type (Series, MOW)	Name of Production	n Position Held	Supervisor/Key	
					_
					_
					_
=					_
Period Films (spe Colouring: Perms: Cutting: Men's Hair: Beards & Mustac	eces:ecify years):				

TRAINING & APPRENTICESHIP, PAST EXPERIENCE: (specify):		
-		
YOUR OWN COM	MMENTS: (and related information	n)
REFERENCES:		e e
Name	Department	Contact Information (phone, e-mail)



# **BARGAINING AUTHORIZATION**

Name:			
	PLEASE	PRINT CLEARLY	
In applying for a membership	o Lunderstan	d that the union intends to	annly to be certified
		to represent me in collec	
do my oxoldolyo bargami	ng agont and	a to represent the in collect	arve bargannig.
Dated this	day of		
DAY		MONTH (Please Spell)	
		(* ************************************	
Signature:			



# SAMPLE RESUME

# SUSIE DRIVEWELL

## **DRIVER - TRANSPORTATION DEPARTMENT**

License: Class 6 and 1 w/Air Endorsement; 2001 Hair License #: 98765; W.H.M.I.S; Set Etiquette; Transportation of Dangerous Goods Certificate; Occupational First Aid Level I

## **SPECIAL ATTRIBUTES**

High Rigging & Cable 1000 to 2000 ft; 3 years at Emily Carr Craft Service School; Microsoft Office

<b>FEATU</b>	JRES	

LATOREO		
Little Lies Feb/14	Big Lie Production 10 Days	PM: John Doe Coordinator
Superman	Superduper Shows	PM: Jane Dodo
Dec/13	2 Days	Coordinator
Mr. T. Rules	Mr. T. TV	Coordinator: Mrs. T.
June/13	30 Days	Special Equipment Driver
Mrs. T. Rules	Mrs. T. TV	PM: Grandad Doe
Oct/12	1 Day	Coordinator
MOWS		
<b>Sun City</b> Jan/14	Sunshine Studios 30 Days	Coordinator: Mr. Sunshine Driver
Cat & Dog	Bob Barker Productions	Coordinator: Miss Meow
Oct/13	4 Days	Special Equipment Driver
Madison	Mad Dog Productions	PM: Jonathan Jones
Aug/13	20 Days	Coordinator
TELEVISION SERIES		
X-Filez	Rainy Day Productions	Coordinator: David Duke-Ovny
Nov/13	10 Days	Driver

#### **AWARDS**

Journeyman High Rigger with Safety Ticket; I.C.S. Motor Racing 1<sup>st</sup> Place; The Annual Peggy Bundy Award for Excellence in Hair and Makeup

## **REFERENCES**

Marsha Brady	Producer/Actor	(604) 456-7890
Hil Clinton	White House Administrator	(818) 240-2440
Don Johnson	Transport Coordinator	(505) 666-6969