

# I.A.T.S.E. Local 22 Referral System Application

PLEASE PRINT CLEARLY

Name _____	Social Security _____
Address _____	Date of Birth _____
_____	Place of Birth _____
City _____	city, state
State _____ Zip _____	Phone Numbers
	Home _____
	Cell _____
Email _____	Pager _____

Emergency Contact _____	Phone _____
Referred By _____	
Availability: Anytime _____ Evenings _____ Weekends _____	
Transportation: Own Vehicle _____ Public Transportation _____	

Education _____		
_____		
Resume _____		
_____		
Theatrical Experience _____		
_____		
CDL _____	Forklift _____	(Certified?) _____
<b>Rate yourself from 0 to 5 (0=no experience, 5=master)</b>		
Rigging (high) _____	Electric _____	Audio _____
Fly Floor _____	Follow Spot _____	Scaffold Erection _____
Carpenter _____	Certified Forklift _____	Certified Snorkel Lift _____
General A/V _____	Video _____	Projection _____
Powerpoint _____	Video Engineering _____	Barco _____
Camera _____	CG Operator _____	Teleprompter _____
Tech Director _____	Computer/Interfacing _____	Video Conference _____
Other _____	Tape Operator _____	_____

<b>I have read and understand the information on the other side of this form.</b>	
Signature _____	Date _____

Office use only:	
First referral date _____	Photo _____
Venue _____	D.L. _____
Mailing _____	S.S.# _____

**IMPORTANT:**

**By completing this Application, I (the Applicant whose name and signature appear on the front of this Application Form) hereby certify that:**

- (1) \_\_\_\_\_ I am at least eighteen (18) years of age.
- (2) I understand that this Application is a request on my part for referral through Local 22 for employment.
- (3) I understand that all referrals by Local 22 are conducted in accordance with the **REFERRAL RULES AND PROCEDURES.**
- (4) I have received and reviewed a copy of the **REFERRAL RULES AND PROCEDURES.**
- (5) I understand that completing this Application does not guarantee employment with a Local 22 signatory employer. If employment through a signatory employer becomes available in the future, Local 22 will notify me by telephone in accordance with the **REFERRAL RULES AND PROCEDURES.**
- (6) I understand that Local 22 will make the first telephone contact with me regarding referral. I will not call Local 22 for a work assignment prior to the first contact by Local 22.
- (7) I agree to pay to Local 22 a referral fee equal to the sum of three and one half percent (3.5%) of gross wages earned while working in Local 22's jurisdiction. Refusal to pay the three and one half percent (3.5%) fee, since said fee is reasonably related to the expense of referral, is a basis upon which Local 22 may deny me further referral. This three and one half percent (3.5%) fee should be paid monthly or by check-off.
- (8) Upon request by Local 22, I will provide verification of the answers and information I have supplied in this Application.

**REFERRALS FOR JOBS ARE NOT MADE ON THE BASIS OF RACE, GENDER, AGE, RELIGION, NATIONAL ORIGIN, OR UNION MEMBERSHIP OR ACTIVITY.**

**THIS APPLICATION WILL AUTOMATICALLY LAPSE NINETY (90) DAYS FROM *EITHER* THE DATE SIGNED *OR* NINETY (90) DAYS FROM THE LAST DATE OF REFERRAL TO EMPLOYMENT. THEREAFTER, YOU MUST FILE A NEW APPLICATION TO OBTAIN REFERRAL TO EMPLOYMENT BY LOCAL 22.**