

2020/2021 Local-Provided Training Skills Training Application

This application packet consists of the Skills Training Application and the Course Reference List.

Your Skills Training Application **must** be approved by Contract Services Administration Training Trust Fund (CSATTF) **prior** to taking the requested course. There is no reimbursement for Local-Provided Training. Please note that Contract Services' facilitation of skills training is not intended to expand, limit or in any way affect the scope of work covered by any collective bargaining agreement.

Eligibility:

- For Roster classifications, you must be active on the Roster for the applicable local union and classification, and be in compliance with Contract Services training requirements. You may check your status on the Online Roster at <u>www.csatf.org</u>, under "Rosters & Lists."
- For Non-Roster classifications, you must reflect on the Online Roster in the applicable Local Union and classification and be in compliance with Contract Services training requirements.

For questions regarding training dates, course content and scheduling, please contact your Local Union.

This form must be completed, signed, and returned as instructed below. Submit one signed application for each requested course. Please allow 1-2 weeks for processing.

Print all information completely and legibly. Personal information will be updated accordingly.

| Name: | Last four digits of SSN*: | | | | | |
|----------------------------------|---------------------------|------------------|--------------------------------|----------------|----------------------|-------------|
| | | | *First t | ime applicants | must provide full SS | Ν |
| Local Union: | Job Title/C | Classification: | | | | |
| Address: | City: | | | State: | Zip Code: | |
| Cell #: <u>()</u> - | Home #: <u>(</u> |) - | Email: | | | |
| Course #: | Course Name | 2: | | | | |
| | (Please | write course har | ne exactly as it a | ippears on th | e Course Reference | e List) |
| I have read, understood and | d agree to all the | e terms and co | nditions listed a | above: | | |
| Applicant Signature: | | | | Date: | | |
| Return this form to CSATTF | via email to <u>skil</u> | lstraining@csa | <mark>tf.org</mark> , in perso | n, by fax or | mail. | |
| CSATTF Attn: Skills Training | | | Phone Numbe | r: 818.847.0 | 040 ext. 1260 | |
| 2710 Winona Avenue | | | Fax Number: | 818.847.004 | -8 | |
| Burbank, CA 91504 | | | | | | |
| | | | | | | |
| | | For Office Use | Only | | | |
| Required Training Compliant:_ | | Completed I | oy: | | | |
| Skills Training Application Expi | res: | | Approved | Denied | | Rev 1/22/20 |



CONTRACT SERVICES

2710 Winona Avenue, Burbank, CA 91504 | T 818.847.0040 | F 818.847.0048 | www.csatf.org **Motion Picture & Television Industry** | Administration • Training

2020/2021 Local Provided Training Course Reference List #1700

Skills Training courses for Local #728 and Local #80:

| Course Number | Course Name | | |
|------------------|---|--|--|
| 1700-583 | TRUSS AND CHAIN MOTORS | | |
| 1700-584 | WIRE ROPE RIGGING | | |
| 1700-585 | ELECTRICAL/RIGGING MATH | | |
| 1700-586 | LIGHTING AND CAR MOUNTS FOR UNCONVENTIONAL CAMERAS | | |
| 1700-587 | CLOUD LIGHTING BALLOONS | | |
| 1700-588 | KNOTS, ROPES, AND TRADITIONAL RIGGING | | |

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