

IATSE 470 DISPATCH ROSTER SHEET

Name:

Address:

City: State: Zip:

Phone: Cell Phone:

Work Phone (optional):

E-Mail:

What times are you available to work with IATSE Local 470? (Weekends, always, certain days, times, etc.)

Do you have your own transportation and are you willing to travel out of a 50 mile radius to work?

Transport Yes No Travel Yes No

Using the numbers 1-5 (1 being excellent and 5 being limited) fill out the skill level chart below. If you have no experience in a particular department, leave the space blank. Please be honest with your evaluation.

CARP	<input type="text"/>	FLY	<input type="text"/>	RIG	<input type="text"/>	FORK	<input type="text"/>
ELEC	<input type="text"/>	SPOT	<input type="text"/>	SOUND	<input type="text"/>	VIDEO/AV	<input type="text"/>
PROPS	<input type="text"/>	WARDROBE	<input type="text"/>	SEW	<input type="text"/>	HAIR	<input type="text"/>

Additional comments or things that you think we should know about you.

Signature: _____ Date: _____

Please mail to:

Business Agent, IA Local 470
P.O. Box 2421
Appleton, WI 54912

or

e-mail to: BA@iatse470.com