

DGACA-EAST APPLICATION • THE NEW YORK AREA QUALIFICATION LIST

980 Broadway • Suite 221 • Thornwood • New York • 10594

NAME: _____

SOCIAL SECURITY (last 4 digits) # XXX-XX-

ADDRESS: _____

CELL PHONE # _____

HOME/ALTERNATE PHONE # _____

CLASSIFICATION APPLYING FOR: 2ND AD 1ST AD MC 1ST AD UPM

E-MAIL ADDRESS _____

TYPE OF APPLICATION: Initial Upgrade ETW SoCal Interchange

PROJECT	CAM	MEDIA	TYPE	JOB TITLE	DATES OF EMPLOYMENT	NUMBER OF WORK DAYS			DOCUMENTATION
						PREP/REH	SHOOT	WRAP	
PROD TITLE: _____ PROD CO: _____ DIRECTOR: _____ UPM: _____ ADs/SMs: _____					FROM: _____ TO: _____		STUDIO/LOCAL DISTANT LOCATION		<input type="checkbox"/> DEAL MEMO <input type="checkbox"/> PAY RECORDS <input type="checkbox"/> PROD REPORTS <input type="checkbox"/> CALL SHEETS <input type="checkbox"/> CREW LIST <input type="checkbox"/> OTHER
PROD TITLE: _____ PROD CO: _____ DIRECTOR: _____ UPM: _____ ADs/SMs: _____					FROM: _____ TO: _____		STUDIO/LOCAL DISTANT LOCATION		<input type="checkbox"/> DEAL MEMO <input type="checkbox"/> PAY RECORDS <input type="checkbox"/> PROD REPORTS <input type="checkbox"/> CALL SHEETS <input type="checkbox"/> CREW LIST <input type="checkbox"/> OTHER
PROD TITLE: _____ PROD CO: _____ DIRECTOR: _____ UPM: _____ ADs/SMs: _____					FROM: _____ TO: _____		STUDIO/LOCAL DISTANT LOCATION		<input type="checkbox"/> DEAL MEMO <input type="checkbox"/> PAY RECORDS <input type="checkbox"/> PROD REPORTS <input type="checkbox"/> CALL SHEETS <input type="checkbox"/> CREW LIST <input type="checkbox"/> OTHER
PROD TITLE: _____ PROD CO: _____ DIRECTOR: _____ UPM: _____ ADs/SMs: _____					FROM: _____ TO: _____		STUDIO/LOCAL DISTANT LOCATION		<input type="checkbox"/> DEAL MEMO <input type="checkbox"/> PAY RECORDS <input type="checkbox"/> PROD REPORTS <input type="checkbox"/> CALL SHEETS <input type="checkbox"/> CREW LIST <input type="checkbox"/> OTHER
PROD TITLE: _____ PROD CO: _____ DIRECTOR: _____ UPM: _____ ADs/SMs: _____					FROM: _____ TO: _____		STUDIO/LOCAL DISTANT LOCATION		<input type="checkbox"/> DEAL MEMO <input type="checkbox"/> PAY RECORDS <input type="checkbox"/> PROD REPORTS <input type="checkbox"/> CALL SHEETS <input type="checkbox"/> CREW LIST <input type="checkbox"/> OTHER

Signature: _____

Date: _____

Page Total:			
<i>For office use:</i>			
Grand Total:			
<i>For office use:</i>			
<i>Previous App:</i>			

NAME: _____

PROJECT	CAM	MEDIA	TYPE	JOB TITLE	DATES OF EMPLOYMENT	NUMBER OF WORK DAYS			DOCUMENTATION
						PREP/REH	SHOOT	WRAP	
PROD TITLE: PROD CO: DIRECTOR: UPM: ADs/SMs:					FROM: TO:		STUDIO/LOCAL DISTANT LOCATION		<input type="checkbox"/> DEAL MEMO <input type="checkbox"/> PAY RECORDS <input type="checkbox"/> PROD REPORTS <input type="checkbox"/> CALL SHEETS <input type="checkbox"/> CREW LIST <input type="checkbox"/> OTHER
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PROD TITLE: PROD CO: DIRECTOR: UPM: ADs/SMs:					FROM: TO:		STUDIO/LOCAL DISTANT LOCATION		<input type="checkbox"/> DEAL MEMO <input type="checkbox"/> PAY RECORDS <input type="checkbox"/> PROD REPORTS <input type="checkbox"/> CALL SHEETS <input type="checkbox"/> CREW LIST <input type="checkbox"/> OTHER

Page Total: _____
For office use: _____

PRODUCTION HEADER / SUMMARY SHEET

(A copy of this form must accompany each production)

YOUR NAME: _____

PRODUCTION TITLE: _____

DOCUMENTATION

DETAILS

DEAL MEMO: _____

PAY RECORDS: _____

PROD REPORTS: _____

CALL SHEETS: _____

CREW LIST: _____

OTHER: _____

DISTANT LOCATION: _____

<i>For office use:</i>	<i>studio</i>	<i>distant</i>	<i>total</i>
<i>prep</i>			
<i>shoot</i>			
<i>wrap</i>			
<i>total</i>			

DGA Contract Administration - East
Additional Data Form
For Initial Placement

To enable the Parties to comply with Section 15-100 of the 2014 Basic Agreement,
the DGA Contract Administration - East requests information on your gender and ethnicity.
(For administrative purposes only)

NAME: _____
(Please Print)

SOCIAL SECURITY NUMBER: XXX - XX -

Please check applicable categories below and return to our office as soon as possible.
Thank You.

MALE

CAUCASIAN

FEMALE

BLACK

HISPANIC

PACIFIC ISLANDER / ASIAN

NATIVE AMERICAN

OTHER _____