

YUKON FILM & SOUND INCENTIVE PROGRAM TRAINING APPLICATION

Film Working Title:		
Production Company:		
Production Office Address:		
Production Office Telephone:	Email	
Production Office E-Mail:		
Permanent Address:		
Permanent Telephone:	Permanent Fax:	
Producer:		
Production Manager:	Accountant:	
Yukon Trainee Name:		
Permanent Address:		
Telephone:	Rate of Pay	
Yukon Resident Since:	Position:	
Start Date:	Projected End Date:	
	nit a Yukon Residency Preapproval	g/education and experience. Yukon form, available at
Non-Yukon Trainer:		
Full Name:		
Permanent Address:		
Telephone:	Position:	
Start Date:	Projected End Date:	Rate of Pay

Please attach complete film resume for trainer, including film training/education and experience. Please attach a list of skills/knowledge that the trainee does not now possess, but will have at the end of the training period.

This form is for approval of a non-Yukon film crew member qualifying under the Yukon Film & Sound Incentive Programs for training a Yukon resident crew person. A full report of days/hours worked and total labour paid for this Yukon resident will be required to complete the application for rebate. Any rebate will be paid directly to the Production Company upon approval and confirmation that Yukon labour costs have been paid.

PLEASE SEND COMPLETED FORM TO:

Mail: Yukon Media Development Box 2703 (F-3) Whitehorse, YT Canada Y1A 2C6 EMAIL: info@reelyukon.com <u>Fax:</u> 1-867-393-7191

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<u>PHONE:</u> +1-867-667-5400