

THE WOMEN IN THE DIRECTOR'S CHAIR WORKSHOP – WORK STUDY / VOLUNTEER CREW APPLICATION FORM

PROGRAM DATES: **January 15 to February 1, 2009**

ARRIVAL: **January 19, 2009**

DEPARTURE: **February 1, 2009**

NAME:					
ADDRESS:					
CITY:		PR:		POSTAL:	
TELEPHONE:	MOBILE:				
FAX:	SOCIAL INS. #:				
E-MAIL:	DATE OF BIRTH:				
EMERGENCY CONTACT:	YOUR GENDER: <small>(for room assignment)</small>		M / F		
TELEPHONE:			SMOKING / NON-SMOKING:		
I learned about this course:					
INITIAL:	I consent to have the information I provide herein used for admission, registration, issuing income and billing receipts, scholarships, awards related to the program and for sending educational information.				
INITIAL:	If selected for the program, I consent to have my telephone and email address listed on the Workshop Contact List that will be shared with fellow participants.				
SIGNATURE:					

Make sure your application is complete. Check that you have included:

<input type="checkbox"/>	Contact information <small>(See above) Include your full name that you use for travel, address, telephone, fax and email. Your SIN and DOB are required upon acceptance into the program.</small>	<input type="checkbox"/>	Brief Cover Letter* <small>State your career goals and reasons for applying. *Up to two pages, 8 1/2 x 11, unbound</small>			
<input type="checkbox"/>	Resume plus Photo/Bio <small>We will need a 50-word Bio (samples available) and an electronic photo of you should you be selected for the program.</small>	<input type="checkbox"/>	Sample of Your Previous Work Optional			
<input type="checkbox"/>	Areas of interest or priority: <small>Prioritize from 1 to 8 (8 being the lowest priority) the areas you are most interested in learning more about. These preferences will be factored in with your areas of strength for placement.</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Areas of strength: <small>Prioritize your strengths from 1 to 8 (8 being the lowest level of competency). This will be factored in with your areas of interest for placement.</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			Camera Trainee	Grip/Electric Swing	Sound	Wardrobe
			PA/TAD	Props	Set Dec	Other <small>(specify)</small>
			Camera Trainee	Grip/Electric Swing	Sound	Wardrobe
			PA/TAD	Props	Set Dec	Other <small>(specify)</small>

SUBMIT ELECTRONICALLY:

WIDC Producer, Carol Whiteman at carol@creativewomenworkshops.com

MAIL HARD-COPY TO:

WIDC 2009 / WS / Volunteer Crew
Creative Women Workshops Association
1243 Duchess Avenue
West Vancouver, BC V7T 1H3

DEADLINE: October 31, 2008

OR HAND-DELIVERY / EMAIL TO:

The WIDC Liaison at your place of study:

Peg Campbell, Emily Carr University
Philip Letourneau or Laurie Johnston, SAIT
Cheryl Dalmer, NAIT
Sarah Abbott, University of Regina
Donna O'Brien-Sokic, Humber School of Media Studies & Information Technologies