

"TRAINEE ASSISTANT ACCOUNTANT  
GUILD APPRENTICE PROGRAM (GAP)"

**APPLICATION FORM**



The Directors Guild of Canada - Ontario  
111 Peter Street, Suite 600  
Toronto, Ontario M5V 2H1  
Phone: (416) 925-8200 Fax: (416) 925-8400  
[www.dgcodc.ca](http://www.dgcodc.ca)

**Contact: Chris Coulter, Membership Assistant**  
**E-mail: [ccoulter@dgcodc.ca](mailto:ccoulter@dgcodc.ca)**

**September 22, 2011**

**TRAINEE ASSISTANT ACCOUNTANT**

**GUILD APPRENTICE PROGRAM (GAP – Trainee Accountant)**

**APPLICATION**

I \_\_\_\_\_  
(print name)

\_\_\_\_\_  
(print complete mailing address)

\_\_\_\_\_  
(telephone #)                      (cell #)                      (e-mail address)

hereby make an application to the Directors Guild of Canada - Ontario ("the Guild") "Guild Apprentice Program – Trainee Accountant". I understand that acceptance of my application includes permission to work on Guild Signatory Productions in such a position for such duration as defined below in this application form.

I agree to abide by and fulfill the requirements as outlined, with a maximum period of 18 months. I also understand that it is my sole responsibility to provide proof of having met these requirements including acceptable proof of work as a Trainee Accountant in the form of payroll records, signed Guild deal memos, prescribed log sheets or other means deemed acceptable by the Administrator of this Program. I understand that I must complete the Program with all the requirements as outlined before making an application for membership in the Guild.

I hereby of my own free will designate the Guild as my sole and exclusive bargaining agent for collective bargaining purposes for minimum terms and conditions of engagement in any and all matters relating to my engagement within the jurisdiction of the Guild, and I do hereby confirm the same in all respects. I hereby agree to be bound by and observe the Guild's National Executive Board, District Council Executive, its membership or respective Committees as they now exist or as they may hereafter be amended.

I agree to the Guild's "Guild Apprentice Program" Check-off of two percent (2%) being deducted from my gross remuneration and remitted by my engager to the Guild on a weekly basis.

I understand and agree that should any information herein provided by me prove to be false, the Guild may expel me from the "Guild Apprentice Program" thereby terminating my right to work within the jurisdiction of the Guild as a Trainee Accountant.

Signature of Applicant \_\_\_\_\_ Dated \_\_\_\_\_

To be eligible for the "Guild Apprentice Program", I am submitting with this application, documentation of the following requirements:

- 1) Letters of Reference (please attach to application)

<b>FROM</b>	<b>GUILD CATEGORY</b>	<b>DATE OF LETTER</b>

- 2) Resume

- 3) A copy of birth certificate or passport (confirming Canadian citizenship)

- 4) \$700 program fee + (\$91 H.S.T.) = Total of \$791.00

Visa # \_\_\_\_\_ Expiry \_\_\_\_\_

MasterCard # \_\_\_\_\_ Expiry \_\_\_\_\_

on \_\_\_\_\_ by \_\_\_\_\_  
(Date) (For the Guild)

Pre-approved by the Director of Member and Training Services