



2800 WINONA AVENUE
BURBANK, CA 91504

T 818.847.0040
F 818.847.0048
www.csatf.org

Approved Skills Training for 2015/2016
Local #706, 800, 839 & 892
Local Provided Training

SKILLS TRAINING APPLICATION / COURSE PRE-APPROVAL FORM

Eligibility: In order to attend Skills Training, you must be in good standing, showing on the Online Roster for the appropriate participating local union and classification. You may check your standing at: www.csatf.org, left navigation under Online Roster, click on General Access. Non-Roster Classification individuals, please see "Special Notes" located on the Reimbursement Acknowledgement Form.

In order to attend CSATTF Skills Training courses, your Skills Training Application **must** be approved by CSATTF **prior** to taking the requested course. You will receive written notification, via e-mail, from CSATTF indicating approval or denial. You are not eligible until you have received pre-approval notification from CSATTF. All approved applications will have expiration dates. **Training must commence before the expiration date indicated on your notification of approval. NO EXCEPTIONS WILL BE MADE.**

The Skills Training Application (one application packet per course) consists of the following two (2) forms:

- Course Pre-Approval Form
- Reimbursement Acknowledgement Form

Both forms **MUST** be completed, signed, and returned as instructed below. Please allow 1-2 weeks for processing.

(PLEASE PRINT ALL INFORMATION CLEARLY)

Name: _____ SSN: _____ Local/Classification: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Contact Number: _____ E-mail Address: _____

Course Name (one application packet per course): _____ Course #: _____

At the completion of the Skills Training course, you will be asked to complete an anonymous electronic survey of your experience in the program. We request that you complete the survey and appreciate your cooperation.

I have read and understood the CSATTF Skills Training Application and Reimbursement Guidelines (where applicable), and I hereby agree to abide by all of the terms and conditions contained therein.

Applicant Signature: _____ Date: _____

For pre-approval determination, please return both forms to CSATTF via e-mail to Kcruz@csatf.org, or fax or U.S. Mail.

CSATTF Attn: Skills Training
2800 Winona Avenue
Burbank, CA 91504

Phone Number: 818.847.0040 extension 1260
Fax Number: 818.847.0048

FOR OFFICE USE ONLY

Form I-9 Date: _____ Safety: _____ Completed by: _____

Skills Training Application Expires: _____

Application Approved

Application Denied



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SKILLS TRAINING APPLICATION/REIMBURSEMENT ACKNOWLEDGEMENT FORM

In order to attend Skills Training, you must be in good standing, showing on the Online Roster for the appropriate participating local union and classification (please see "Special Notes" below). You may check your standing at: www.csatf.org, left navigation under Online Roster, click on General Access.

The Skills Training Application (one application packet per course) consists of two (2) forms:

- Course Pre-Approval Form
- Reimbursement Acknowledgement Form

Skills Training Application questions: 818.847.0040 extension 1260.

For training dates, course content and scheduling questions, please contact your Local Union.

Special Notes:

Industry Experience Roster (IER) Classifications for Local #706 & 800: To be eligible for pre-approval and 2/3 reimbursement from CSATTF, you must be in good standing, showing on the Online Roster for the appropriate participating local union and classification. You may check your standing at: www.csatf.org, left navigation under Online Roster, click on General Access.

Non IER Classifications for Local #800, 839 & 892: To be eligible for pre-approval from CSATTF, you must be in good standing, showing on the Online Roster for the appropriate participating local union and classification. You may check your standing at: www.csatf.org, left navigation under Online Roster, click on General Access. If your name is not reflected on the Online Roster, please provide proof of at least 30 Union workdays of applicable IATSE Local #800, 839 or 892 covered employment within the past two years. You must include, along with your pre-approval application, an employment verification letter from a payroll company or an employer showing your exact work dates, job classification and social security number OR copies of supporting pay stubs showing actual work time (sick or vacation time is not eligible). *****Please Note***** More than one form of employment verification may be needed for pre-approval. Your application will be denied if no employment verification is submitted.

Reimbursement Guidelines:

N/A

2015/2016 Skills Training courses for Local #706, 800, 839 & 892:

01 One Point Perspective	16 Color Theory 1	31 3D 101	46 In-Design Advanced Topics 2
02 Two Point Perspective	17 Color Theory 2	32 Photogrammetry 101	47 In-Design Advanced Topics 3
03 Three Point Perspective	18 Textures 1	33 Configuring Files for 3D Printing	48 Zbrush Introduction
04 Atmospheric Perspective	19 Storytelling 1	34 After Effects & Photoshop for Presentations Practicum 1	49 Zbrush Fundamentals
05 Curvilinear Perspective	20 Storytelling 2	35 After Effects & Photoshop for Presentation Practicum 2	50 Zbrush Advanced-Beginner
06 Anatomy 1	21 Style for Animation	36 Photoshop Review	51 Zbrush Intermediate
07 Costume Drawing 1	22 Storyboarding Key Frames	37 Photoshop Advanced Topics 1	52 Zbrush Advanced
08 Costume Drawing 2	23 Animal Drawing 1	38 Photoshop Advanced Topics 2	53 Maya Introduction
09 Drapery and Folds 1	24 Animal Anatomy	39 Photoshop Advanced Topics 3	54 Maya Fundamentals
10 Drapery and Folds 2	25 Dynamic Sketching on Location	40 Illustrator Review	55 Maya Advanced-beginning
11 Gesture Drawing 1	26 Drawing and Film Studies	41 Illustrator Advanced Topics 1	56 Maya Intermediate
12 Drawing Expressions	27 Digital Painting 1	42 Illustrator Advanced Topics 2	57 Maya Advanced
13 Drawing from Imagination 1 (Male)	28 Digital Painting 2	43 Illustrator Advanced Topics 3	
14 Drawing from Imagination 1 (Female)	29 Sculpting a Character Maquette	44 In-Design Review	
15 Compositional Sketches	30 Quick Sculpting	45 In-Design Advanced Topics 1	

I, _____, have read and understood the CSATTF Skills Training Application,

Print Name

Special Notes and Reimbursement Guidelines, and I hereby agree to abide by all of the terms and conditions contained therein.

Signature of Applicant: _____ **Date:** _____