

SASKATCHEWAN FILM EMPLOYMENT TAX CREDIT PROGRAM REQUEST FOR DEEMING

This form must be submitted, along with each corresponding **Training Plan prior to the first day of principal photography.*

Production Title:	
Production Company:	
Parent Production Company:	
Address:	
City:	Postal Code:
Phone:	Fax:
Contact Person:	Title:

First day of Principal Photography:
Last day of Principal Photography:

Applicable Union or Guild (please submit one Request for Deeming form for each of the following):

- DGC
 IATSE
 ACTRA
 Non-union Position

Mentor Name	Mentor Position	Trainee Name	Trainee Position	Reason # (see below)

- Please indicate why an out-of-province mentor was hired:
1. Qualified Saskatchewan resident declined the offer or was unavailable.
 2. There is no qualified Saskatchewan resident.

I declare that to the best of my knowledge, the information contained herein is true and complete.

(Signature of Producer or Production Manager)

Printed Name:

Date of Signing:

(Signature of Union or Guild Representative)

Printed Name:

Date of Signing:

N. B.: Final approval is contingent upon receipt and approval of all closing documentation by the applicable Union/Guild and SaskFilm.