

2020 I.A.T.S.E. ADVANCED OFFICER INSTITUTE 2.0

ORGANIZING 2.0 | LAS VEGAS | SEPTEMBER 14 – 17, 2020
 SECRETARY-TREASURER 2.0 | CLEVELAND | OCTOBER 5 – 7, 2020
 ORGANIZING 2.0 | NEW ORLEANS | DECEMBER 1 - 4, 2020

ORGANIZING 2.0 - Local Unions are encouraged to send candidates who have the power to move an action forward in their Local which fosters growth and strength.

PRE-REQUISITE SECRETARY-TREASURER 2.0 – You must currently hold office in your local union as Secretary or Treasurer or (regardless of office) be a graduate of a prior IATSE Officer Institute, held in Philadelphia, Chicago, Los Angeles, Calgary, New York City, Atlanta 2015, Las Vegas, Toronto, Cambridge, Austin, Vancouver, Linthicum Heights, Denver, Orlando, Nashville, Atlanta 2018, Toronto 2018, San Francisco, Minneapolis, or Phoenix.

**APPLICATIONS MUST BE SUBMITTED TO THE I.A.T.S.E. EDUCATION DEPARTMENT AT LEAST 4 WEEKS PRIOR TO THE BEGINNING OF COURSE.
 PARTICIPANTS ARE REQUIRED TO ATTEND ALL CLASSES TO GRADUATE AND RECEIVE THEIR CERTIFICATE.**

PLEASE PRINT LEGIBLY

1. APPLICANT				
LAST NAME		FIRST NAME		MIDDLE INITIAL
NAME AS YOU WISH IT TO APPEAR ON CERTIFICATE, if different from above:				
STREET ADDRESS			HOME PHONE	
CITY	STATE/PROVINCE	ZIP CODE/POSTAL CODE	WORK PHONE	
EMAIL ADDRESS (please print)			CELL PHONE	
SOCIAL MEDIA HANDLES/USERNAMES, IF APPLICABLE:				
FACEBOOK		TWITTER		INSTAGRAM
2. SESSION (ALL CLASSES FOR U.S. AND CANADIAN LOCALS)				
<input type="checkbox"/> ORGANIZING 2.0 – LAS VEGAS, NV 4-DAY COURSE: SEPTEMBER 14-17, 2020 FOR U.S. LOCALS ONLY		<input type="checkbox"/> SECRETARY-TREASURER 2.0 – CLEVELAND, OH 3-DAY COURSE: OCTOBER 5 – 7, 2020 FOR U.S. AND CANADIAN LOCALS (MUST BE AN IATSE O.I. GRADUATE OR CURRENTLY HOLD OFFICE AS A SECRETARY OR TREASURER)		
<input type="checkbox"/> ORGANIZING 2.0 – NEW ORLEANS, LA 4-DAY COURSE: DECEMBER 1-4, 2020 FOR U.S. AND CANADIAN LOCALS				
3. LOCAL UNION INFORMATION				
LOCAL NUMBER	LOCAL UNION CITY/STATE	POSITION AT LOCAL	HOW LONG IN CURRENT OFFICE	
4. APPLICANT SIGNATURE				
I certify that all the information on this form is true and complete to the best of my knowledge. I agree that the I.A.T.S.E. can share my name with its General Executive Board and with any local union. I consent to the use by I.A.T.S.E. of my name or likeness to promote or publicize the I.A.T.S.E. (whether in print or electronic form or otherwise). I hereby release I.A.T.S.E. from any and all liability for using my name or likeness and waive all claims against I.A.T.S.E. arising from the use of such information. I also hereby grant a license to I.A.T.S.E. to use my name or likeness and expressly disclaim all rights to all value and benefit(s) I.A.T.S.E. may gain through the use of such information.				
SIGNED			DATE	
5. AUTHORIZATION FROM THE LOCAL UNION EXECUTIVE BOARD				
I certify that I.A.T.S.E. LOCAL _____ endorses the enrollment of the above named applicant in the I.A.T.S.E Officer Institute 2.0.				
SIGNED			DATE	
TITLE				
FOR IATSE EDUCATION DEPARTMENT USE				
APPLICATION RECEIVED	STATUS AND NOTIFICATION		INITIALS	

**Return Completed Application via Email to officerinstitute@iatse.net
 or Mail to: I.A.T.S.E Officer Institute 207 West 25th Street, 4th Floor New York, NY 10001
 Facebook: @iatse | Twitter: @iatse**