



Production
Services, LLC

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Burbank, California 91504-3350
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New York, NY 10036
818.848.6022

CCP-SI
VER. 07/24

Start/Close Form

Producing company

Project title

Social security number

Employee legal name

Date of birth

Permanent address (include number and street, city, state, and zip code)

Mailing address *if different* (include number and street, city, state, and zip code)

Phone number

E-mail address

ACA hiring status
Full time Variable

Gender (optional) Non-Binary
☐ M ☐ F ☐ Identify as Non-Binary where recognized

Ethnicity (optional)
☐ H - Hispanic or Latino ☐ WH - White (Not Hispanic or Latino) ☐ AA - Black or African American (Not Hispanic or Latino) ☐ AS - Asian (Not Hispanic or Latino)
☐ AP - Native Hawaiian or Pacific Islander (Not Hispanic or Latino) ☐ AN - Native American or Alaska Native (Not Hispanic or Latino)
Check one: ☐ TW - Two or More Races (Not Hispanic or Latino) ☐ NG - I do not wish to disclose ☐ OT - Other

Union membership Union jurisdiction OCC Code Schd. letter Job description

Hire state Work state Start date Home plan
Yes ☐ No ☐

Terms of employment	Studio		Distant		Account Number
Rate per hour					
Rate per week					
Hours per day					
Hours per week					
6th and 7th days	Pay 6th day at \$	Pay 7th day at \$	Pay 6th day at \$	Pay 7th day at \$	
Idle days			Pay at scale <input type="checkbox"/> Pay at employee rate <input type="checkbox"/>		
Equipment rental					
Car allowance					
Cell allowance					
Additional allowances					

☐ Nearby hire ☐ Distant hire ☐ Local hire ☐ Production city

Note: Overtime will be calculated pursuant to applicable law or contract.

Additional client use

For payroll company use only

By signing this form, I authorize the employer, or its service or payroll provider, to take deductions from my earnings (regardless of payment method) to adjust previous overpayments if and when said overpayments may occur.
"Agree" - Employee signature and date

Authorized signature(s) and date(s)