

SAG-AFTRA SHORT PROJECT AGREEMENT REQUEST FOR EMPLOYMENT VERIFICATION

I request SAG-AFTRA ("Union") verify my employment as a Principal Performer or a Background Actor on the Short Project(s) listed below so I may obtain a membership application from the Union.

Principal Performers must submit at least one (1) program for verification. Background Actors must submit at least three (3) programs for verification.

| Program Title | Performer Role (Background Actors note BG) | Signatory Producer | Dates Worked |
|---------------|---|--------------------|--------------|
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In the event the Project(s) above cannot be verified, I am providing the following alternate(s):

| Program Title | Performer Role (Background Actors note BG) | Signatory Producer | Dates Worked |
|---------------|---|--------------------|--------------|
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To the best of my knowledge, the Project(s) listed above was/were signatory to the SAG-AFTRA Short Project Agreement ("SPA") and I was engaged under a SAG-AFTRA contract.

I have attached all SAG-AFTRA Performer or Background Actor contracts for the above noted Project(s) to support my request. (If available, please also attach copies of your pay stubs for work on the above noted projects.)

I understand employment verification is solely at the discretion of SAG-AFTRA and that SAG-AFTRA may not verify all employment listed above. I further understand that any misrepresentation made to the Union regarding my employment above may result in my ineligibility to join the Union.

| UNDERSTOOD AND AGREED: | |
|------------------------|--|
| Performer Signature | |
| Please Type Legal Name | |
| Date | |

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Please submit this signed letter along with a fully completed and signed copy (or copies) of your Principal Performer or Background Actor contract(s) and pay stub(s) (if applicable) to SPAeVerify@sagaftra.org for employment verification. Please allow up to 2-4 weeks for review and response.