Letter of recommendation for all persons applying for a **Stunt Actor** grading

All letters of recommendation **must** be completed by the referee on this form.

Name of the applicant: _____

Name of referee: _____

Your contact number: _____

Level at which you are graded: _____

Date of your grading: _____

Please list the jobs which the applicant has worked for you / you have worked alongside the applicant:

Production title	Your role	Their role	Did they require a dispensation?

Has the applicant continued to train/ upskill since their SAP grading: YES/NO

Please provide details of your knowledge of the applicants' competencies and range of skills as applied for in this grading submission:

_____
_____
_____
_____
_____
_____

Does the applicant apply appropriate safety protocols to their work? YES/NO
Is the applicant professional in their work? YES/NO
What are the applicant's characteristics that make them suitable to continue to advance in the industry?

_____
_____
_____
_____
_____
_____

Have you sighted the applicant's grading submission? YES/NO

Do you believe that the requirements to fulfil the grading criteria have been met? YES/NO

Signed: _____

Date: _____