Application Form Working in Film and TV

Please complete this application form, including the equality monitoring data. Send to Four Corners along with:

- 1 proof of address (dated within the last 3 months)
- Proof of benefit payments
- A copy of your passport or residency permit
- A copy of your current CV

Address: Four Corners, 121 Roman Road, London E2 0QN Email: info@fourcornersfilm.co.uk

SECTION 1	
Full Name:	
NI Number:	
Date of birth:	
Full address and postcode:	
What London borough do you live in?	
Contact number(s):	
Email address:	
What is your current employment status? (please tick)	

(Please note you cannot apply if you are in full-time education)

- Working full-time
- Working part-time
- Part-time student
- Unemployed and claiming an out-of-work benefit
- Unemployed and NOT claiming an out-of-work benefit

Are you currently claiming any of the following? (please tick)

- Carers allowance
- Child benefit
- Child tax credit
- Employment support allowance
- Housing benefit
- Income support
- Job seekers allowance
- Personal Independence Payment / Disability Living Allowance
- Universal Credit Working tax credit
- None of the above
- Other:

Education and Training - please provide details of your education and qualifications, including any training courses.

Work experience in the Film/TV industry - please provide details of your previous work experience, paid or unpaid.

Work experience NOT in the Film/TV industry – please provide details of your previous work experience, paid or unpaid.
Why are you interested in applying for this scheme? (Please give details)

What barriers do you face to gaining employment and other opportunities, and progressing in Film/TV? (please tick all that apply to you)

- Confidence barriers
- Motivation
- Physical or mental health experience
- Non graduate/low education level
- Practical skills/knowledge in film/TV
- Job seeking skills
- CV writing/interview skills
- Isolation lack of networks and contacts
- Knowing how to progress in film/TV career
- Work placement/volunteer experience
- Childcare needs
- Other (please provide details below)

SECTION 2: Housing

Are you:

- A home owner
- Living in social housing
- Living in a private rented property
- Living in temporary accommodation/Homeless

SECTION 3: Language and Maths Skills

Is English your first language?

- Yes
- No

If English is not your first language, how well do you understand and speak English?

- Not very well
- Quite well
- Very well

Are you able to do basic sums?

- Yes
- Not very well
- No

How did you hear about this training opportunity?

SECTION 4: EQUALITY MONITORING QUESTIONS

What is your age?

- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+
- Prefer not to say

What is your gender?

- Female
- Male
- Prefer to self describe
- Prefer not to say

Do you consider yourself to have a disability?

- Yes
- No
- Prefer not to say

Do you have a long-term health condition that affects your day-to-day life?

- Yes
- No
- Prefer not to say

If yes, please state the type of health problem or disability that applies to you:

- Sensory impairment
- Physical impairment
- Learning disability or cognitive impairment
- Mental health condition or neurodivergence
- Long-standing illness or health condition
- Prefer not to say
- Other:

What is your ethnic group?

- Asian or Asian British (Includes any Asian background, for example, Bangladeshi, Chinese, Indian, Pakistani)
- Black, African, Black British, or Caribbean (Includes any Black background)
- Mixed or multiple ethnic groups (Includes any Mixed background)
- White (Includes any White background, for example, White British, White European) Prefer not to say
- Other (please give details)

What is your sexuality?

- Bisexual
- Gay/Lesbian
- Heterosexual
- Prefer not to say
- Other:

Do you have caring/parenting responsibilities?

- Yes
- No
- Prefer not to say

Do you have refugee status?

- Yes
- No
- Prefer not to say

Thank you for applying! We will let you know if we have shortlisted you for an interview after the application deadline.