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***Last Word* Film Fund - Application Form**

Please read the *Last Word* Festival Film Fund Terms & Conditions before completing this application.  
  
**PRIVATE AND CONFIDENTIAL**

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| **Name** | |
| **Date of Birth** | **Age** |
| **Address** | |
| **Email** | **Phone** |
| **Working Title:** | |

**Employment Monitoring and Equal Opportunities**

The Roundhouse aims to ensure the fair and equitable treatment of all applicants and to meet the requirements of equal opportunities legislations.

To help us monitor our selection procedures please complete this form, all information will be treated as private and confidential and will not be used in the selection process.

I would describe my ethnic origin as:

Asian British  Chinese

Bangladeshi  Mixed ethnic background

Indian  White British

Pakistani  White European

Black British  White Other

Black Caribbean  Irish

Black African  Other

Black Other

I am : Male  Female  Do you have a disability? Yes  No

If yes, do you require support for your disability, please give details:

What is your current employment status?

Employed – full time  Self-employed

Employed – part time  Unemployed

In education

Other (please specify

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| **Working title for film:** |
| **Genre of film:** |
| **Proposed length of film (No longer than 3 mins):** |
| **Why do you want to make this film?**  (maximum 100 words) |
| **Treatment** (see Treatment Guidelines)  Please attach a Treatment document for your film, this should be 2-3 pages, including any visual references. |
| **Budget** (Please outline how you would spend the Bursary) |
| **Materials, equipment, facilities** (needed to complete your film) |
| **Production and Creative Team** (Please only includedetails of collaborations you have confirmed) |
| **Previous experience** (include links to your previous work) |
| **Additional Support** Would you need additional support from Roundhouse to complete your film? (eg. specialist mentoring/training) |
| **How did you hear about this Fund?** |

**Reference**

Please give the name and address of a referee, preferably one who knows you in a filmmaking capacity:

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| **Name** |
| **Relationship to you** |
| **Email Address** |
| **Telephone** |
| **How long has this person known you?** |

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| **Declaration**  I confirm that to the best of my knowledge the information given on this application is true and correct  Signature of applicant:       Date: |

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| **Data Protection**  Would you like to hear about similar opportunities and receive our Young Creatives e-newsletter?   * I would like to receive emails from the Roundhouse * I would NOT like to receive emails from the Roundhouse |