



Application Form

5 & 10 Day Digital Video (DV) Film-making Courses

Please make sure you have read fully the Course description and requirements.

Question and Answer Sessions are at WFA on Wed 14th May between 10.30am-12.30pm for Deaf people & 2.00pm - 4.00pm for BME people & other participants
and in Cheshire on Wed 17th June 10.30am - 12.30 of Deaf people & 2.00pm - 4.00pm for BME people & others

Which course are you applying for (please tick box)

5 day course at WFA in Manchester on 2 - 6th June '08

5 day course in Cheshire on 30th June - 4th July '08

10 day course at WFA in Manchester on 1- 12th Sept '08

We need to know as much about yourself as possible to help us assess jointly with you your training requirements and competence level and to ensure a fair selection. If you have any difficulty filling in this application form, we will be happy to help you - please give us a ring or come in to see us.

Please answer the following questions as fully as possible.

1) Full name _____

Address _____

Post Code: _____

Telephone: _____

Date of Birth : _____

Mobile: _____

Email: _____

2) Please give details of any audio/video/film/new media/computer graphics/artistic training courses you have attended:

Dates	Organisation	Course	Qualification
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supported by:



Updated 29.4.08

WFA Media & Cultural Centre, 9 Lucy St, Manchester, M15 4BX, Tel: 0161 848 9782/5

WFA is registered (No 2345OR, Registry Friendly Societies) as an educational Co-operative for the benefit of the community.

3) Please give a brief description of any previous media work and your current work

4) What do you expect of the Course

5) Do you have any requirements (arising from health, disability & deafness, dependant care) to enable you to be interviewed for and participate in this training course?

Please specify briefly. WFA is committed to providing the best conditions for all within its finite resources. This question helps us to assess how we can best meet requirements and / or make reasonable adjustments. If relevant please use Check List for Deaf participants.

Declaration

To the best of my knowledge and belief the information I have given above is correct.
I have read fully the appropriate course description and requirements:

Signed _____

Date _____

Application deadlines and interviews will take place as follows

For the 5 day course starting 2nd June '08, applications due by 19th May & interviews will be 22nd May

For the 5 day course starting 30th June '08, applications due by 20th June & interviews will be 24th June

For the 10 day course starting 1st Sept, applications due by 18th Aug & interviews will be 21st Aug

Please return this completed Application form as early as possible before the start date.

**All Applications to be returned to:
WFA Media and Cultural Centre
9 Lucy Street, Manchester M15 4BX**

Thank you for your co-operation.

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WFA's Training Officer

Updated 29.4.08 Please turn over

Applicant Monitoring information (Please return with your Application Form)

Please complete the following information to help us monitor and evaluate that we are reaching the widest range and diversity of people and communities we would like to attract to these training courses. WFA is offering 45 free training places to Deaf and BME participants with the support of NW Vision + Media and Esmee Fairbairn Foundation. All Deaf and BME applicants will be considered equally through the selection procedure.

WFA positively welcomes applications from people who are under-represented in this industry – women, Deaf & disabled people, people from ethnic minorities, and other socially excluded people. A positive action policy is practiced to actively promote their participation within training courses.

In regard to this positive action please complete the following information.

1) Date of birth: _____ **Age:** __

2) Gender: male female
(please tick as appropriate)

3) Ethnic origin group

(one tick only please)

- | | |
|---|--|
| <input type="checkbox"/> White British | <input type="checkbox"/> Pakistani |
| <input type="checkbox"/> Irish Irish | <input type="checkbox"/> Bangladeshi |
| <input type="checkbox"/> Any other white background | <input type="checkbox"/> Any other Asian background |
| <input type="checkbox"/> White & black Caribbean | <input type="checkbox"/> Caribbean |
| <input type="checkbox"/> White & Black African | <input type="checkbox"/> African |
| <input type="checkbox"/> White & Asian | <input type="checkbox"/> Any other Black background |
| <input type="checkbox"/> Any other Mixed background | <input type="checkbox"/> Chinese |
| <input type="checkbox"/> Indian | <input type="checkbox"/> Any other ethnic background |

4) Do you have a disability? yes no (please tick as appropriate)

Are you Deaf ? yes no (please tick as appropriate)

5) Are there any other exclusionary issues you are affected by?

6) How did you get to know about this course?

- Direct from WFA** (mailing, visit etc)
- Leaflet** (picked up away from WFA)
- Advertisement** _____ (please indicate where you saw it)
- Word of mouth**
- WFA's website**
- Another website** _____ (which one)

Thank you for your help. This information will be dealt with in strict confidence.