

# fourcorners

## Camera-works Application Form

First Name..... Surname.....

Address.....

Postcode..... Borough .....

Telephone.....

Mobile.....

Email.....

Age ..... Date of birth .....

Male

Female

Transgender

Non-binary

Prefer not say

### PHOTOGRAPHIC EDUCATION & TRAINING (IF ANY)

Schools, Colleges, University and Training Courses Attended.	Qualifications obtained. (Give subjects and grades)

**PRACTICAL PHOTOGRAPHY SKILLS:**

Do you own and use an analogue film camera? YES NO

Do you own and use a digital SLR camera? YES NO

Have you ever printed photos in a darkroom? YES NO

Have you ever used a photographic lighting studio? YES NO

Do you have any other photographic skills? Please state.....

**WORK HISTORY (If applicable)**

Name and Address	Post (briefly describe duties)	From	To	Salary

**What aspects of this course would you like to apply for? (Please highlight below)**

**Project 1: Camera, Darkroom, Studio Lighting and Exhibition YES NO**

**Project 2: Professional Studio Lighting YES NO**

**Project 3: Mentoring Masterclasses YES NO**

**What experience or knowledge would you like to gain from attending a photography course?**

**Have you attended a Four Corners course before? YES NO**

If yes, which course and when?

**Where did you hear about the Camera-works programme?**

.....

**Please sign and date this application**

Signature..... Date.....

Camera-works is generously supported by the London Borough of Tower Hamlets Local Community Fund.



**EQUAL OPPORTUNITIES: Please highlight answers which apply to you.**

**Do you have a disability?** YES NO

1. Please give a brief outline of your disability (if applicable).

2. Do you have any specific accessibility needs? YES NO

This could include tailored print-outs or wheelchair access etc.

3. Do you have a long-term health issue (12 months plus) which affects your daily activities? YES NO

\* The Equality Act defines a disabled person as someone who has a physical or mental impairment that has a substantial and long-term adverse effect on their ability to perform normal day-to-day activities. It also covers people who have been diagnosed with HIV, cancer or multiple sclerosis. (Definitions: 'substantial' means more than minor or trivial; 'long-term' means that the effect of the impairment has lasted, or is likely to last, for at least 12 months; 'normal day-to-day activities' include everyday things like eating, washing, walking and going shopping.) Does the Equality Act's definition of being disabled apply to you? If so, please apply.

**Which of the following groups do you belong to?**

- |                                       |  |
|---------------------------------------|--|
| 1. White-British                      | 2. White -Irish                          |
| 3. White – Other                      | 4. Mixed White and Caribbean             |
| 5. Mixed – White and African          | 6. Mixed White and Asian                 |
| 7. Mixed – Other                      | 8. Asian or Asian British – Indian       |
| 9. Asian or Asian British – Pakistani | 10. Asian or Asian British – Bangladeshi |
| 11. Asian or Asian British – other    | 12. Black or Black British – Caribbean   |
| 13. Black or Black British – African  | 14. Black or Black British - other       |
| 15. Chinese                           | 16. Other                                |
| 17. Prefer not to say                 |  |

**What is the highest qualification you hold?**

No qualifications

GCSE

A level

NVQ

Undergraduate

Post graduate

Other (please specify) .....

**Do you belong to any of the following categories?**

- |                                |                           |                             |
|--------------------------------|---------------------------|-----------------------------|
| 1. Ex-offender                 | 2. Homeless               | 3. Refugee or Asylum seeker |
| 4. Drug and or Alcohol misuser | 5. Labour market returner | 6. Lone parent              |

I declare that the details attached with this application form are true to the best of my knowledge:

**Signature:** .....

**Date:** .....

**Camera-works Photography Programme 2023-2027**

**Four Corners Ltd,**

**121 Roman Road,**

**London**

**E2 OQN**

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