## ellie nee

## ellie nee registration form

**NAME**: CHARLOTTE QUILLET

EMAIL: charlotte.quillet@gmail.com

TITLE: ms

PLEASE FILL OUT THE FOLLOWING INFORMATION:

FIRST NAME ON PASSPORT : CHARLOTTE

**SURNAME**: QUILLET

ADDRESS: 21 merriam avenue

**HOME TEL**: 07474299082

**MOBILE**: 07474299082

EMAIL: charlotte.quillet@gmail.com

TWITTER:

**GOOGLE** + PROFILE NAME :

**NATIONALITY**: French

**NEXT OF KIN NAME**: Andres Clerc

**NEXT OF KIN CONTACT**: 07454022566

DO YOU HAVE A WORK PERMIT OR VISA TO WORK IN THE UK?: NO

**DO YOU HAVE ANY CRIMINAL CONVICTIONS? : NO** 

REFERENCES:

REFERENCE 1. PLEASE FILL OUT THE FOLLOWING INFORMATION:

**COMPANY NAME**: Ink and Giant

**START DATE**: 2017-03-15

**END DATE**: 2017-09-16

**POSITION HELD**: Motion Designer

LINE MANAGER NAME: Jumoke Ogunkoya

LINE MANAGER JOB TITLE: Manager

EMPLOYER ADDRESS: Ugli Campus Block C, 56 Wood Ln, White City, London W12 7SB

EMPLOYER PHONE NUMBER: 020 3096 7209

EMPLOYER EMAIL: jumoke@inkandgiants.com

REFERENCE 2. PLEASE FILL OUT THE FOLLOWING INFORMATION:

**COMPANY NAME:** Found Studio

**START DATE**: 2018-02-20

**END DATE**: 2018-05-14

**POSITION HELD**: Motion Designer

**LINE MANAGER NAME**: Chloe Bayley

LINE MANAGER JOB TITLE: Manager

EMPLOYER ADDRESS: 220, The Record Hall, 16-16a Baldwin's Gardens, London EC1N 7RJ

EMPLOYER PHONE NUMBER: 020 7278 9447

**EMPLOYER EMAIL** : Chloe@found-studio.com

**EMPLOYMENT HISTORY:** 

(PLEASE FILL OUT IF LOOKING FOR FREELANCE OR CONTRACT POSITION)

EMPLOYER:

**EMPLOYER NAME**: Golden Wolf

**EMPLOYER ADDRESS**: [textarea-employersaddress3]

**CONTACT NUMBER**: 020 7253 6977

**EMAIL** : hello@goldenwolf.tv

**START DATE** : 2015-04-02

**END DATE**: 2015-05-12

**DAY RATE**: 280 - 300

LINE MANAGER: Ant Baena

PAYMENT DETAILS:

(PLEASE COMPLETE IF LOOKING FOR FREELANCE OR CONTRACT POSITIONS)

PLEASE SELECT A PAY TYPE: LTD

THE FOLLOWING INFORMATION IS REQUIRED FOR ellie nee PAYROLL AND HMRC INTERMEDIARY REPORTING - TIMESHEETS CANNOT BE PROCESSED WITHOUT THIS INFORMATION:

PLEASE SELECT A PAY TYPE: LTD

NAME OF LIMITED/UMBRELLA COMPANY: CHARLOTTE QUILLET LTD

**LIMITED COMPANY UMBRELLA ADDRESS**: [text-ltdumbrellacompanyaddress3]

PLEASE SELECT A PAY TYPE [checkbox\* checkbox-paytype "PAYE" "LTD" "UMBRELLA COMPANY"]

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NAME OF LIMITED/UMBRELLA COMPANY REGISTRATION NUMBER: Charlotte Quillet Ltd

**VAT REGISTRATION NUMBER:** 0

NI NUMBER: SR 82 41 06 C

**GENDER**: Female

WORKING TIME DIRECTIVE (PLEASE FILL OUT IF LOOKING FOR FREELANCE OR CONTRACT POSITION)

I CAN CONFIRM THAT I AM HAPPY TO VOLUNTARILY OPT OUT OF THE 48 HOUR WORKING WEEK, ALLOWING ME TO WORK MORE THAN 48 HOURS PER WEEK WHEN NECESSARY. IF I CHANGE MY MIND, I AGREE TO GIVE ellie nee 3 MONTHS WRITTEN NOTICE TO END THIS AGREEMENT. PLEASE SIGN BELOW

**DATE OF BIRTH**: 1989-12-04

TICK HERE: YES

**DATE**: 2018-06-04