ellie nee

ellie nee registration form

NAME: Leon Elliot

 $\pmb{EMAIL}: vfxs and eman@gmail.com$

TITLE: mr

PLEASE FILL OUT THE FOLLOWING INFORMATION:

FIRST NAME ON PASSPORT : Phillip Roberto

SURNAME: Sandeman

ADDRESS: 53 Park Central Building

60 Fairfield Road London, E3 2US UK

HOME TEL: 07581429125

MOBILE: 07581429125

EMAIL: vfxsandeman@gmail.com

TWITTER:

GOOGLE + PROFILE NAME :

NATIONALITY: British

NEXT OF KIN NAME: Melanie Sourisseau

NEXT OF KIN CONTACT: 07517575629

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: Digital Media Services UK LTD

START DATE: 18 October 2016

END DATE: 10 February 2017

POSITION HELD: Motion Graphic Designer

LINE MANAGER NAME: Nicolas Vargas

LINE MANAGER JOB TITLE: Motion Graphics Team Leader

EMPLOYER ADDRESS: Shand House, 14-20 Shand St, London SE1 2ES

EMPLOYER PHONE NUMBER: +44 203 750 5150

EMPLOYER EMAIL : Nicolas.Vargas@dmsukltd.com

REFERENCE 2. PLEASE FILL OUT THE FOLLOWING INFORMATION:

COMPANY NAME: UM London

START DATE: NA

END DATE : NA

POSITION HELD: Freelance Motion Graphic Designer

LINE MANAGER NAME: Joanna Kilvington

LINE MANAGER JOB TITLE : Producer

EMPLOYER PHONE NUMBER: +44 (0)20 7073 7268 **EMPLOYER EMAIL**: Joanna.Kilvington@umww.com EMPLOYMENT HISTORY: (PLEASE FILL OUT IF LOOKING FOR FREELANCE OR CONTRACT POSITION) EMPLOYER: **EMPLOYER NAME: EMPLOYER ADDRESS**: [textarea-employersaddress3] **CONTACT NUMBER: EMAIL**: **START DATE: END DATE: DAY RATE**: 200-250 LINE MANAGER: NA PAYMENT DETAILS: (PLEASE COMPLETE IF LOOKING FOR FREELANCE OR CONTRACT POSITIONS) **PLEASE SELECT A PAY TYPE: LTD**

EMPLOYER ADDRESS: 42 St John's Square, Clerkenwell, London EC1M 4EA

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: VFXSANDEMAN

LIMITED COMPANY UMBRELLA ADDRESS: [text-ltdumbrellacompanyaddress3]

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

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

NAME OF LIMITED/UMBRELLA COMPANY REGISTRATION NUMBER: 10736459

VAT REGISTRATION NUMBER: NA

NI NUMBER: JH224789B

GENDER: Male

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: 09/08/1985

TICK HERE: YES

DATE: 11/06/2018