



CrossCreative:Immersive - 2019/20

We recommend **downloading this application form as a PDF**, and saving your answers elsewhere before completing and submitting online via this form. Please note that you can't save your progress via this online survey. Applications must be submitted online.

Applications are open until close of play on the 18th of September.

If you have any questions about your application, please contact Alex.Blott@trcmedia.org

Information collected via this online form is hosted by Survey Monkey ([privacy-policy](#)) and saved to TRC's secure internal system. Please see our [privacy-policy](#) for further information on how we process your data.

If you have any questions please contact Michelle Conlin: michelle.conlin@trcmedia.org

*** 1. Please provide the following:**

First Name

Last Name

Address

City

Post Code

Mobile Phone

Email Address

*** 2. Social Details:**

Linkedin

Twitter

Other

*** 3. How did you hear about CrossCreative:Immersive?**

*** 4. Company Details**

Company name	<input type="text"/>
Your position within the company	<input type="text"/>
Industry sector/sub-sector	<input type="text"/>
Company address	<input type="text"/>
Company website	<input type="text"/>
Length of time with the company	<input type="text"/>
Company directors	<input type="text"/>
Number of years trading in Scotland	<input type="text"/>
Number of full-time staff employed in Scotland	<input type="text"/>
Number of contractual staff employed in Scotland	<input type="text"/>
Turnover (UK)	<input type="text"/>
Turnover (International)	<input type="text"/>

5. Invoicing Details For Your Company

Name on Invoice	<input type="text"/>
Email Address	<input type="text"/>
Company Name	<input type="text"/>
Company Address 1	<input type="text"/>
Company Address 2	<input type="text"/>
City/Town	<input type="text"/>
Postcode	<input type="text"/>

Please Note: Invoices must be paid in full ahead of the start of the programme.

*** 6. In applying you recognise that you are committing your availability to the following dates:
October 29-30th, November 27-28th, January 18-22nd (International Trip), February 18th**

I will be available on these dates

* 7. Is the company Account Managed by either Scottish Enterprise or Business Gateway?

- Yes - Scottish Enterprise
- Yes - Business Gateway
- No

WHY YOU?

Your answers in this next section will form the foundation of what we send to businesses on our international trip. We want to hear about your most exciting work, and your greatest ambitions for your business.

* 8. What kinds of immersive technology does your company have experience working with?

- AR
- VR
- XR
- Other (please specify)

* 9. What kind of Immersive Storytelling work are you interested in pursuing in the future? (Max 500 words)

* 10. Please provide a synopsis of your company and its key digital projects. Include links where possible. (Max 500 words)

* 11. Please outline why you wish to take part and what you hope to gain from CrossCreative:Immersive. (Max 500 words)

* 12. Please outline your role and responsibilities within your company and a brief outline of previous key roles. (Max 500 words)

Please submit a copy of you CV here - [link](#)

13. Company reference (if applicable)

Name of reference

Contact email

Contact telephone

As this is a company-focused programme you must have endorsement from the company owner or Managing Director (written statement of support). If you are the Managing Director, please indicate this below.

*** 14. Reference Statement of Support**

15. Would you like to be added to TRC's mailing list?

EQUAL OPPORTUNITIES MONITORING

TRC is committed to equality and fairness for all irrespective of race, colour, creed, ethnic or national origin, gender, gender reassignment, marital status, sexual orientation, religion, disability or age. We oppose all forms of unlawful or unfair discrimination. To help us monitor our equality policy please complete this monitoring form.

The information you provide will only be used to monitor the effectiveness of our policy and will be treated in the strictest confidence. It will be used for statistical monitoring only and is not part of the selection process.

*** 16. Ethnicity**

- | | |
|--|---|
| <input type="radio"/> White Scottish/White British | <input type="radio"/> African/African Scottish/African British |
| <input type="radio"/> White Irish | <input type="radio"/> Carribean/Carribean Scottish/Carribean British |
| <input type="radio"/> White Other, Please specify | <input type="radio"/> Black/Black Scottish/Black British |
| <input type="radio"/> Gypsy/Traveller | <input type="radio"/> Arab/Arab Scottish/Arab British |
| <input type="radio"/> Asian/Asian Scottish/Asian British | <input type="radio"/> Mixed or Multiple Ethnic Groups, please specify |
| <input type="radio"/> Chinese/Chinese Scottish/Chinese British | <input type="radio"/> Prefer not to say |
| <input type="radio"/> Other (please specify) | |

*** 17. Age Range. Please tick the age bracket you belong to**

- | | |
|-----------------------------|---|
| <input type="radio"/> 18-24 | <input type="radio"/> 45-54 |
| <input type="radio"/> 25-34 | <input type="radio"/> 55-64 |
| <input type="radio"/> 35-44 | <input type="radio"/> Prefer not to say |

* 18. Sexual Orientation. Which of the following best describes how you think about yourself?

- Bisexual
- Gay woman / Lesbian
- Gay man
- Heterosexual / Straight
- Prefer not to say

* 19. Do you consider yourself to have a disability or a long-term health condition

- Yes
- No
- Prefer not to say

* 20. If yes, please indicate your type of disability

- Hearing
- Learning Difficulties
- Long Term Illness
- Manual Dexterity or Coordination
- Mental Health
- Other (please specify)
- Mobility
- Reduced Physical Capacity
- Speech
- Visual
- Prefer Not To Say