CONTACT INFORMATION

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| --- |
| **NAME:** |
| **Home Address:** | Post code: |
| **Address to which papers for meetings should be sent (if different)** | Post code: |
| **Home telephone:** |  |
| **Work telephone:** |  |
| **Mobile telephone:** |  |
| **email address: (the one you check regularly please)** |  |
| **Any comment or notes about contacting you that I should be aware of: (eg preferred contact phone number)** |  |

SKILLS / EXPERTISE / EXPERIENCE / QUALIFICATIONS

|  |  |
| --- | --- |
| **Please outline what skills, expertise, experience you would bring to the governing body of St Francis Xavier eg financial; accountancy; audit; law; teaching & learning; special educational needs experience; management etc** |  |
| **Please note any qualifications you hold** |  |

**Data Protection Notice**

Any information held by SFX about Governors will only be used in connection with College and Governors’ business and in line with the 8 Principles of the Data Protection Act (1998). Accordingly, your contact details may be shared with Senior Staff of the College when appropriate.

Please confirm by checking this box that you are in agreement with this 🞎

In signing you confirm receipt of the Governors’ Code of Conduct and agree not to divulge information about the College or its students to third parties.

Signed:

Date:

PLEASE RETURN TO ELEANOR LEWIS, CLERK TO THE GOVERNORS.