## **POSITION OF COMMUNITY GOVERNOR**

## **EXPRESSION OF INTEREST FORM**

NAME O	F SCHOOL:			
Title:	Surname:			
Address:				
			Postcode:	
Tel. Home:		Tel. Wo	Tel. Work:	
E-mail Addres	s:	•		
Have you eve	r been a school gover	nor?	YES/NO	
If you have expour have exp	rperience of being a go erience of serving on	overnor, please may be relevan	outline any sub-committees t to your application:	

Please set out below why you would like to become a member of the Governing Body, and any particular areas in which you feel you would be able to contribute to the establishment of the provision (e.g. experience of Finance, HR, data analysis e t c):				