

RECOMMENDATION FOR SCHOOL OR COLLEGE BOARD APPOINTMENT

* Please complete all sections of form before submitting recommendation for approval* SCHOOL/COLLEGE NAME: FULL NAME OF NOMINEE _____ Mr / Mrs / Ms / Dr / Other ADDRESS: Email: _____ Home: _____ Bus: _____ Mobile: PHONE: OCCUPATION: **ASSOCIATION WITH SCHOOL/COLLEGE:** Parent / Care Giver - children attending School/College _____ Parent / Care Giver – children attending other School/College _____ School Association: (Parent / P & F /Committees / etc) **RELIGIOUS AFFILIATION:** (Religion / Church Involvement) Please attach a brief CV / Business background. П Please attach a list of current Board Membership Identifying: Religious Affiliation / Gender / Number of years as a Member / Occupation Current, or willingness to acquire and maintain, satisfactory National Police and/or Working with Vulnerable People Checks (where applicable)

Signe	ed (Principal)	Signed (Board Chair/Parish Priest)	
CEO OFFICE USE ONLY:			
	Approved By Director or Governing Council	/	
	Letter produced & mailed	//	