

## **GOVERNOR APPOINTMENTS, RE-APPOINTMENTS, RESIGNATIONS, DISQUALIFICATIONS and EXPIRY OF TERMS OF OFFICE**

If an appointment or resignation occurs on your Board of Governors please complete this sheet and either return it to Governor Services, 3<sup>rd</sup> Floor Council House, Solihull, B91 3QS at your earliest convenience. Alternatively you can E-Mail the relevant information to us at [governorservices@solihull.gov.uk](mailto:governorservices@solihull.gov.uk)

**Name of School .....**

**Date .....**

**Governor Appointments:**

Name of Governor	Full Address	Telephone Number	E Mail Address (if known)	Is the person new to Governorship?	Date of Appointment	Type of Gov (eg: Parent)	Police Checked?

**Governor Re-Appointment:**

Name of Governor	Date of Re-Appointment:

Name of Governor	Date of Re-Appointment:

**Governor Resignations\Disqualifications:**

Name of Governor	Date of Resignation or Disqualification	Reason for Resignation \ Disqualification (if known)

**Governor Term of Office Expiry:** (please complete this section if a Governors' Term of Office has expired and they do not wish to be re-elected)

Name of Governor	Date of Expiry of Term of Office:

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