



Declaration of Pecuniary/Business and Personal interest

Name: Toni Cullenpe

School: The Park Academies Trust

Position: Trustee

T. Cullenpe, declare as a Governor/Trustee/Member of The Park Academies Trust that I hold the following personal and/or pecuniary interest(s):

Pecuniary interests	Please provide details of the interest
Current employment	N/A
Businesses (of which I am a partner or sole proprietor)	N/A
Company directorships – details of all companies of which I am a director	N/A
Charity trusteeships – details of all companies of which I am a trustee	N/A
Membership of professional bodies, membership organisations, public bodies or special interest groups of which I am a member and have a position of general control or management	N/A
Gifts or hospitality offered to you by external bodies while acting in your position as a governor/trustee and whether this was declined or accepted in the last 12 months	N/A
Contracts offered by you for the supply of goods and/or services to the trust/school	N/A
Any other conflict	N/A

Personal interests	Name	Relationship to me	Organisation	Nature of the interest
Immediate family/close connections to governor/trustee	N/A			
Company directorships or trusteeships of family/close connections to governor/trustee	N/A			

If you are a governor/trustee/member of any other schools and/or academies, please provide details below:

Name of school/academy:

N/A

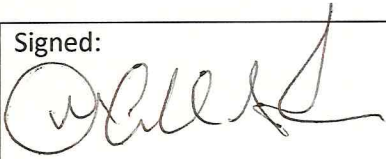
Position held:

Date appointed/elected to post:

Date of termination to post:

Insurance

The insurance declaration below is to allow us to buy insurance to protect governors from claims of negligence or liability as a result of their role as a Governor/Member/Trustee of the Academy.

<p>I confirm that, I have not; been declined insurance, been barred from being a director, had a criminal conviction.</p> <p>I am not aware of any circumstance or incident which may give rise to a claim.</p>	<p>Signed:</p> 
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To the best of my knowledge the information supplied above is correct and complete. I understand that it is my responsibility to declare any conflict of interest/loyalty, business or personal that relates directly or indirectly, to myself or any relation in any contract, proposed contract or other matter when present at a meeting at the school where such contract or matter comes under consideration. I understand that I must withdraw from any meeting during the discussion of such contract or matter and must not vote in respect of it.

I agree to review and update this declaration annually and give consent for the information provided to be used in accordance with the trust/school's conflicts of interest policy.

Signed:



Date:

10 Sep 18.



Declaration of Pecuniary/Business and Personal interest

Name: CLIVE ZIMMERMAN

School: LPA / APS

Position: EXEC PRINCIPAL

I Clive Zimmerman, declare as a ~~Governor/Trustee/Member~~ of TPAT that I hold the following personal and/or pecuniary interest(s):

Pecuniary interests	Please provide details of the interest
Current employment	EXEC PRINCIPAL FOR THE TRUST
Businesses (of which I am a partner or sole proprietor)	NONE
Company directorships – details of all companies of which I am a director	NONE
Charity trusteeships – details of all companies of which I am a trustee	NONE
Membership of professional bodies, membership organisations, public bodies or special interest groups of which I am a member and have a position of general control or management	NONE
Gifts or hospitality offered to you by external bodies while acting in your position as a governor/trustee and whether this was declined or accepted in the last 12 months	NONE
Contracts offered by you for the supply of goods and/or services to the trust/school	NONE
Any other conflict	NONE

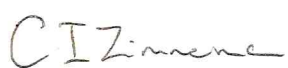
Personal interests	Name	Relationship to me	Organisation	Nature of the interest
Immediate family/close connections to governor/trustee	N/A			
Company directorships or trusteeships of family/close connections to governor/trustee	N/A			

If you are a governor/trustee/member of any other schools and/or academies, please provide details below:

Name of school/academy: _____ N/A _____
 Position held: _____
 Date appointed/elected to post: _____
 Date of termination to post: _____

Insurance

The insurance declaration below is to allow us to buy insurance to protect governors from claims of negligence or liability as a result of their role as a Governor/Member/Trustee of the Academy.

I confirm that, I have not; been declined insurance, been barred from being a director, had a criminal conviction. I am not aware of any circumstance or incident which may give rise to a claim.	Signed: 
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To the best of my knowledge the information supplied above is correct and complete. I understand that it is my responsibility to declare any conflict of interest/loyalty, business or personal that relates directly or indirectly, to myself or any relation in any contract, proposed contract or other matter when present at a meeting at the school where such contract or matter comes under consideration. I understand that I must withdraw from any meeting during the discussion of such contract or matter and must not vote in respect of it.

I agree to review and update this declaration annually and give consent for the information provided to be used in accordance with the trust/school's conflicts of interest policy.

Signed: _____ C I Zinnene _____
 Date: _____ 10/9/18 _____



Declaration of Pecuniary/Business and Personal interest

Name: CORINNA MAZZOTTA

School: _____

Position: Trustee

I Corinna Mazzotta, declare as a Governor/Trustee/Member of The Park Academies Trust that I hold the following personal and/or pecuniary interest(s):

Pecuniary interests	Please provide details of the interest
Current employment	<u>NIL</u>
Businesses (of which I am a partner or sole proprietor)	<u>NIL</u>
Company directorships – details of all companies of which I am a director	<u>NIL</u>
Charity trusteeships – details of all companies of which I am a trustee	<u>NIL</u>
Membership of professional bodies, membership organisations, public bodies or special interest groups of which I am a member and have a position of general control or management	<u>NIL</u>
Gifts or hospitality offered to you by external bodies while acting in your position as a governor/trustee and whether this was declined or accepted in the last 12 months	<u>NIL</u>
Contracts offered by you for the supply of goods and/or services to the trust/school	<u>NIL</u>
Any other conflict	<u>NIL</u>

Personal interests	Name	Relationship to me	Organisation	Nature of the interest
Immediate family/close connections to governor/trustee				
Company directorships or trusteeships of family/close connections to governor/trustee				

If you are a governor/trustee/member of any other schools and/or academies, please provide details below:

Name of school/academy: _____

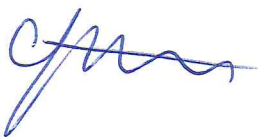
Position held: _____

Date appointed/elected to post: _____

Date of termination to post: _____

Insurance

The insurance declaration below is to allow us to buy insurance to protect governors from claims of negligence or liability as a result of their role as a Governor/Member/Trustee of the Academy.


<p>I confirm that, I have not; been declined insurance, been barred from being a director, had a criminal conviction.</p> <p>I am not aware of any circumstance or incident which may give rise to a claim.</p>	<p>Signed: </p>
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I agree to review and update this declaration annually and give consent for the information provided to be used in accordance with the trust/school's conflicts of interest policy.

Signed: _____

Date: _____


10/9/18



Declaration of Pecuniary/Business and Personal interest

Name: Louise Bouteiller
School: Park Academies Trust
Position: Trustee

ILouise Bouteiller., declare as a Governor/Trustee/Member of ...The Park Academies Trust..... that I hold the following personal and/or pecuniary interest(s):

Pecuniary interests	Please provide details of the interest
Current employment	n/a
Businesses (of which I am a partner or sole proprietor)	SB Nexus Ltd – no interest
Company directorships – details of all companies of which I am a director	SB Nexus Ltd – no interest
Charity trusteeships – details of all companies of which I am a trustee	n/a
Membership of professional bodies, membership organisations, public bodies or special interest groups of which I am a member and have a position of general control or management	n/a
Gifts or hospitality offered to you by external bodies while acting in your position as a governor/trustee and whether this was declined or accepted in the last 12 months	n/a
Contracts offered by you for the supply of goods and/or services to the trust/school	n/a
Any other conflict	n/a

Personal interests	Name	Relationship to me	Organisation	Nature of the interest
Immediate family/close connections to governor/trustee				n/a
Company directorships or trusteeships of family/close connections to governor/trustee				n/a

If you are a governor/trustee/member of any other schools and/or academies, please provide details below:

Name of school/academy: _____

Position held: _____

Date appointed/elected to post: _____

Date of termination to post: _____

Insurance

The insurance declaration below is to allow us to buy insurance to protect governors from claims of negligence or liability as a result of their role as a Governor/Member/Trustee of the Academy.

<p>I confirm that, I have not; been declined insurance, been barred from being a director, had a criminal conviction. I am not aware of any circumstance or incident which may give rise to a claim.</p>	<p>Signed: _____</p>
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To the best of my knowledge the information supplied above is correct and complete. I understand that it is my responsibility to declare any conflict of interest/loyalty, business or personal that relates directly or indirectly, to myself or any relation in any contract, proposed contract or other matter when present at a meeting at the school where such contract or matter comes under consideration. I understand that I must withdraw from any meeting during the discussion of such contract or matter and must not vote in respect of it.

I agree to review and update this declaration annually and give consent for the information provided to be used in accordance with the trust/school's conflicts of interest policy.

Signed: _____

K. Bower

Date: _____

9/9/18



Declaration of Pecuniary/Business and Personal interest

Name: AMY ARMSTRONG

School: THE PARK ACADEMIES TRUST

Position: TRUSTEE

I AMY ARMSTRONG declare as a ~~Governor~~/Trustee/~~Member~~ of The Park Academies Trust that I hold the following personal and/or pecuniary interest(s):

Pecuniary interests	Please provide details of the interest
Current employment	SWINDON BOROUGH COUNCIL
Businesses (of which I am a partner or sole proprietor)	
Company directorships – details of all companies of which I am a director	
Charity trusteeships – details of all companies of which I am a trustee	
Membership of professional bodies, membership organisations, public bodies or special interest groups of which I am a member and have a position of general control or management	
Gifts or hospitality offered to you by external bodies while acting in your position as a governor/trustee and whether this was declined or accepted in the last 12 months	
Contracts offered by you for the supply of goods and/or services to the trust/school	
Any other conflict	

Personal interests	Name	Relationship to me	Organisation	Nature of the interest
Immediate family/close connections to governor/trustee				
Company directorships or trusteeships of family/close connections to governor/trustee				

If you are a governor/trustee/member of any other schools and/or academies, please provide details below:

Name of school/academy: _____

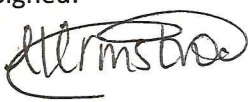
Position held: _____

Date appointed/elected to post: _____

Date of termination to post: _____

Insurance

The insurance declaration below is to allow us to buy insurance to protect governors from claims of negligence or liability as a result of their role as a Governor/Member/Trustee of the Academy.

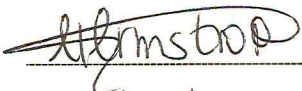
<p>I confirm that, I have not; been declined insurance, been barred from being a director, had a criminal conviction.</p> <p>I am not aware of any circumstance or incident which may give rise to a claim.</p>	<p>Signed: </p>
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To the best of my knowledge the information supplied above is correct and complete. I understand that it is my responsibility to declare any conflict of interest/loyalty, business or personal that relates directly or indirectly, to myself or any relation in any contract, proposed contract or other matter when present at a meeting at the school where such contract or matter comes under consideration. I understand that I must withdraw from any meeting during the discussion of such contract or matter and must not vote in respect of it.

I agree to review and update this declaration annually and give consent for the information provided to be used in accordance with the trust/school's conflicts of interest policy.

Signed: _____

Date: _____


28/01/2019.



Declaration of Pecuniary/Business and Personal interest

Name: MARK ANTHONY EDWARDS

School: ABBEY PARK SCHOOL

Position: TRUSTEE / CHAIR OF THE ABBEY PARK IEB

I MARK ANOTHNY EDWARDS declare as a Governor/Trustee/Member of THE PARK ACADEMIES TRUST, that I hold the following personal and/or pecuniary interest(s):

Pecuniary interests	Please provide details of the interest
Current employment	EMPLOYED BY BP.
Businesses (of which I am a partner or sole proprietor)	N/A
Company directorships – details of all companies of which I am a director	DIRECTOR – MADISON WALK II MANAGEMENT COMPANY DIRECTOR – MILLER PLACE MANAGEMENT COMPANY
Charity trusteeships – details of all companies of which I am a trustee	TRUSTEE – FIRST SWINDON SEA SCOUTS
Membership of professional bodies, membership organisations, public bodies or special interest groups of which I am a member and have a position of general control or management	N/A
Gifts or hospitality offered to you by external bodies while acting in your position as a governor/trustee and whether this was declined or accepted in the last 12 months	N/A
Contracts offered by you for the supply of goods and/or services to the trust/school	N/A
Any other conflict	N/A

Personal interests	Name	Relationship to me	Organisation	Nature of the interest
Immediate family/close connections to governor/trustee	OLIVER EDWARDS CHARLOTTE EDWARDS JACOB EDWARDS	CHILDREN	RED OAKS PRIMARY SCHOOL	PUPILS
Company directorships or trusteeships of family/close connections to governor/trustee	DEBBIE EDWARDS	WIFE	FRIENDS OF RED OAKS	TREASURER

If you are a governor/trustee/member of any other schools and/or academies, please provide details below:

Name of school/academy: N/A
Position held: _____
Date appointed/elected to post: _____
Date of termination to post: _____

Insurance

The insurance declaration below is to allow us to buy insurance to protect governors from claims of negligence or liability as a result of their role as a Governor/Member/Trustee of the Academy.

I confirm that, I have not; been declined insurance, been barred from being a director, had a criminal conviction. I am not aware of any circumstance or incident which may give rise to a claim.	Signed:
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To the best of my knowledge the information supplied above is correct and complete. I understand that it is my responsibility to declare any conflict of interest/loyalty, business or personal that relates directly or indirectly, to myself or any relation in any contract, proposed contract or other matter when present at a meeting at the school where such contract or matter comes under consideration. I understand that I must withdraw from any meeting during the discussion of such contract or matter and must not vote in respect of it.

I agree to review and update this declaration annually and give consent for the information provided to be used in accordance with the trust/school's conflicts of interest policy.

Signed: 

Date: 07/09/18



Declaration of Pecuniary/Business and Personal interest

Name:

Scott Robins

Trust: ~~School:~~

The Park Academies Trust (TPAT)

Position:

Trustee

I Scott Robins, declare as a ~~Governor~~/Trustee/Member of TPAT that I hold the following personal and/or pecuniary interest(s):

Pecuniary interests	Please provide details of the interest
Current employment	N/A
Businesses (of which I am a partner or sole proprietor)	N/A
Company directorships – details of all companies of which I am a director	N/A
Charity trusteeships – details of all companies of which I am a trustee	N/A
Membership of professional bodies, membership organisations, public bodies or special interest groups of which I am a member and have a position of general control or management	N/A
Gifts or hospitality offered to you by external bodies while acting in your position as a governor/trustee and whether this was declined or accepted in the last 12 months	N/A
Contracts offered by you for the supply of goods and/or services to the trust/school	N/A
Any other conflict	

Personal interests	Name	Relationship to me	Organisation	Nature of the interest
Immediate family/close connections to governor/trustee				
Company directorships or trusteeships of family/close connections to governor/trustee				

If you are a governor/trustee/member of any other schools and/or academies, please provide details below:

Name of school/academy:


Position held:

Date appointed/elected to post:

Date of termination to post:

Insurance

The insurance declaration below is to allow us to buy insurance to protect governors from claims of negligence or liability as a result of their role as a Governor/Member/Trustee of the Academy.

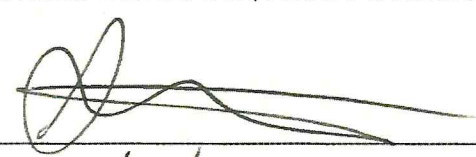
<p>I confirm that, I have not; been declined insurance, been barred from being a director, had a criminal conviction.</p> <p>I am not aware of any circumstance or incident which may give rise to a claim.</p>	<p>Signed:</p> 
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To the best of my knowledge the information supplied above is correct and complete. I understand that it is my responsibility to declare any conflict of interest/loyalty, business or personal that relates directly or indirectly, to myself or any relation in any contract, proposed contract or other matter when present at a meeting at the school where such contract or matter comes under consideration. I understand that I must withdraw from any meeting during the discussion of such contract or matter and must not vote in respect of it.

I agree to review and update this declaration annually and give consent for the information provided to be used in accordance with the trust/school's conflicts of interest policy.

Signed:

Date:


 5/9/2018



Declaration of Pecuniary/Business and Personal interest

Name: FREDERICK JOHN CHILD

School: PARKS ACADEMIES TRUST

Position: TRUSTEE

I Frederick John Child, declare as a Governor/Trustee/Member of Park Academies Trust that I hold the following personal and/or pecuniary interest(s):

Pecuniary interests	Please provide details of the interest
Current employment	<u>Retired</u>
Businesses (of which I am a partner or sole proprietor)	<u>None</u>
Company directorships – details of all companies of which I am a director	<u>None</u>
Charity trusteeships – details of all companies of which I am a trustee	<u>None</u>
Membership of professional bodies, membership organisations, public bodies or special interest groups of which I am a member and have a position of general control or management	<u>Fellow BRITISH INSTITUTE OF FACILITIES MANAGEMENT</u> <u>Member of 41 club</u> <u>Member Friends of Rotary</u>
Gifts or hospitality offered to you by external bodies while acting in your position as a governor/trustee and whether this was declined or accepted in the last 12 months	<u>None</u>
Contracts offered by you for the supply of goods and/or services to the trust/school	<u>None</u>
Any other conflict	<u>None</u>

Personal interests	Name	Relationship to me	Organisation	Nature of the interest
Immediate family/close connections to governor/trustee	None			
Company directorships or trusteeships of family/close connections to governor/trustee	None			

If you are a governor/trustee/member of any other schools and/or academies, please provide details below:

Name of school/academy: _____

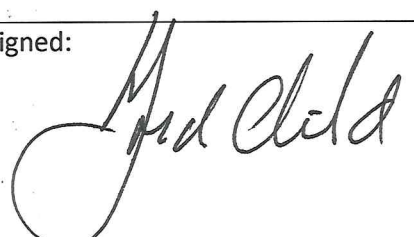
Position held: _____

Date appointed/elected to post: _____

Date of termination to post: _____

Insurance

The insurance declaration below is to allow us to buy insurance to protect governors from claims of negligence or liability as a result of their role as a Governor/Member/Trustee of the Academy.

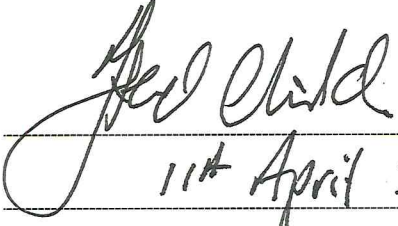
<p>I confirm that, I have not; been declined insurance, been barred from being a director, had a criminal conviction.</p> <p>I am not aware of any circumstance or incident which may give rise to a claim.</p>	<p>Signed: </p>
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To the best of my knowledge the information supplied above is correct and complete. I understand that it is my responsibility to declare any conflict of interest/loyalty, business or personal that relates directly or indirectly, to myself or any relation in any contract, proposed contract or other matter when present at a meeting at the school where such contract or matter comes under consideration. I understand that I must withdraw from any meeting during the discussion of such contract or matter and must not vote in respect of it.

I agree to review and update this declaration annually and give consent for the information provided to be used in accordance with the trust/school's conflicts of interest policy.

Signed: _____

Date: _____


11th April 2018



Declaration of Pecuniary/Business and Personal interest

Name: Dave Allen
School: tpat
Position: trustee

I DAVE ALLEN, declare as a Governor/Trustee/Member of TPAT that I hold the following personal and/or pecuniary interest(s):

Pecuniary interests	Please provide details of the interest
Current employment	none
Businesses (of which I am a partner or sole proprietor)	Premier services/ premier water softeners
Company directorships – details of all companies of which I am a director	As above
Charity trusteeships – details of all companies of which I am a trustee	none
Membership of professional bodies, membership organisations, public bodies or special interest groups of which I am a member and have a position of general control or management	none
Gifts or hospitality offered to you by external bodies while acting in your position as a governor/trustee and whether this was declined or accepted in the last 12 months	none
Contracts offered by you for the supply of goods and/or services to the trust/school	none
Any other conflict	none


Personal interests	Name	Relationship to me	Organisation	Nature of the interest
Immediate family/close connections to governor/trustee	none			
Company directorships or trusteeships of family/close connections to governor/trustee	none			

If you are a governor/trustee/member of any other schools and/or academies, please provide details below:

Name of school/academy: tpat
Position held: trustee
Date appointed/elected to post: _____
Date of termination to post: _____


Insurance

The insurance declaration below is to allow us to buy insurance to protect governors from claims of negligence or liability as a result of their role as a Governor/Member/Trustee of the Academy.

<p>I confirm that, I have not; been declined insurance, been barred from being a director, had a criminal conviction. I am not aware of any circumstance or incident which may give rise to a claim.</p>	<p>Signed: _____ </p>
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I agree to review and update this declaration annually and give consent for the information provided to be used in accordance with the trust/school's conflicts of interest policy.

Signed: 
Date: 01/09/18



Declaration of Pecuniary/Business and Personal interest

Name: Alastair Dixon-Patterson
School: Trust
Position: Director of Finance and Operations

I Alastair Dixon-Patterson, declare as a Governor/Trustee/Member of The Park Academies Trust that I hold the following personal and/or pecuniary interest(s):

Pecuniary interests	Please provide details of the interest
Current employment	DFO at The Park Academies Trust
Businesses (of which I am a partner or sole proprietor)	none
Company directorships – details of all companies of which I am a director	Padham Properties Limited
Charity trusteeships – details of all companies of which I am a trustee	none
Membership of professional bodies, membership organisations, public bodies or special interest groups of which I am a member and have a position of general control or management	ISBL (Institute of School Business Leadership)
Gifts or hospitality offered to you by external bodies while acting in your position as a governor/trustee and whether this was declined or accepted in the last 12 months	none
Contracts offered by you for the supply of goods and/or services to the trust/school	none
Any other conflict	no


Personal interests	Name	Relationship to me	Organisation	Nature of the interest
Immediate family/close connections to governor/trustee	n/a			
Company directorships or trusteeships of family/close connections to governor/trustee	n/a			

If you are a governor/trustee/member of any other schools and/or academies, please provide details below:

Name of school/academy: n/a
Position held: _____
Date appointed/elected to post: _____
Date of termination to post: _____

Insurance

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I confirm that, I have not; been declined insurance, been barred from being a director, had a criminal conviction. I am not aware of any circumstance or incident which may give rise to a claim.	 Signed: _____
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I agree to review and update this declaration annually and give consent for the information provided to be used in accordance with the trust/school's conflicts of interest policy.

Signed: _____



10.09.2018

Date: _____