**(Insert School Name) Full Governing Body Details 20../20..**

Please complete and send to governorsupport@lincolnshire.gov.uk

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| **Title & Name** | **Tel / Mobile** | **Email** | **Governor Position** | **Chair/Vice Chair** | **Appointment / Reappointment Date** | **Retirement Date** |
|  |  |  | Headteacher |  | Click here to enter a date. |  |
|  |  |  | **Clerk** |  | Click here to enter a date. |  |
|  |  |  | Please select  | Please select | Click here to enter a date. | Click here to enter a date. |
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| **Title & Name** | **Tel / Mobile** | **Email** | **Governor Position** | **Chair/Vice Chair** | **Appointment / Reappointment Date** | **Retirement Date** |
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