



PART OF THE PAX CHRISTI CATHOLIC ACADEMY TRUST

REGISTER OF BUSINESS INTERESTS

Form t acade		by all governors	who are NO	Femployed as member	ers of staff at the
Name	CLHIRE	SNOWDON			
				guidance on the reve inancial Handbook.	rse of this form
1.				ons/memberships/share e a direct interest in the	
	Yes		No		
lf yes,	you will be asked	d to complete a De	eclaration of	Business of Interests	Form
Signa	ture		Date	<u> </u>	
C	5xw00-		19	-09-18	





Part of the Our Lady of Lourdes Catholic Multi Academy Trust

REGISTER OF BUSINESS INTERESTS

Form t acade	to be completed my.	i by all gover	nors who are	NOT emple	oyed as mer	nbers of st	aff at the
Name	1JEOM	A NN	urus1				
_	overnor, I confir n aware of the I			_			nis form
1.	Have you or a reas explained in	•			•		•
	Yes		No	~	1		
lf yes,	you will be aske	ed to complet	e a Declarati	on of Busine	ess of Intere	sts Form	
Signa	iture			Date			
		**************************************		19 9	118		





Part of the Our Lady of Lourdes Catholic Multi Academy Trust

REGISTER OF BUSINESS INTERESTS

Form to be completed by the Principal and all members of staff who may be in a position to influence any financial decisions at the Academy.
1. Name PAUL CHIPCHASE
As a member of staff confirm that I have read the Notes of Guidance and am aware of the requirements of the Academies Financial Handbook and the Academy Finance Policy have access to a copy for reference.
I set out below my business interests.
Employment at the Academy (please tick one box)
Principal Non-teaching staff
Teaching staff □
2. Have you or a related person to you have any connections/memberships/shares in companies etc which have a direct or indirect business interest in the Academy?
Yes □ No 🗾
If yes, you will be asked to complete a Declaration of Business Interests Form
Signature: P. W. Date: 17#55/eullev 20(8)
Please return this to the Principal of the Academy within 7 days for insertion in the Register of Business Interests.





Part of the Our Lady of Lourdes Catholic Multi Academy Trust

REGISTER OF BUSINESS INTERESTS

Form t a posi	to be completed by the Principal and all members of staff who may be i tion to influence any financial decisions at the Academy.	n
1.	Name LOUISE GOWARDS	
of the r	nember of staff confirm that I have read the Notes of Guidance and am award requirements of the Academies Financial Handbook and the Academy ce Policy have access to a copy for reference.	9
I set οι	ut below my business interests.	
1.	Employment at the Academy (please tick one box)	
	Principal Non-teaching staff	
	Teaching staff □	
2.	Have you or a related person to you have any connections/memberships/shares in companies etc which have a direct or indirect business interest in the Academy?	
	Yes No	
If yes,	you will be asked to complete a Declaration of Business Interests Form	
Signati	ture Date: 17.9.18. (no changes to above	∌)





Part of the Our Lady of Lourdes Catholic Multi Academy Trust

REGISTER OF BUSINESS INTERESTS

	to be completed by the Principal a tion to influence any financial dec	nd all members of staff who may be in sions at the Academy.
1.	Name CLAIRE PYL	E
of the	nember of staff confirm that I have rear requirements of the Academies Fina ce Policy have access to a copy for I	· · · · · · · · · · · · · · · · · · ·
l set o	ut below my business interests.	
1.	Employment at the Academy (please	se tick one box)
	Principal 🗆	Non-teaching staff □
	Teaching staff □	
2.	Have you or a related person to you connections/memberships/shares in indirect business interest in the Aca	companies etc which have a direct or
	Yes □	No 🔎
If yes,	you will be asked to complete a Dec	aration of Business Interests Form
Signat	ture:	Date: 7/9/18 (no changes to above)





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REGISTER OF BUSINESS INTERESTS

Form to be completed by the Principal and all members of staff who may be in a position to influence any financial decisions at the Academy.

1.	Name CHRISTA	BALES				
of the		emies Financia	al H	Notes of Guidance and am aware landbook and the Academy ce.		
l set o	ut below my business inter	ests.				
1.	Employment at the Acade	emy (please tio	k c	one box)		
	Principal 🗆	No	n-te	eaching staff		
	Teaching staff □					
2.	Have you or a related person to you have any connections/memberships/shares in companies etc which have a direct or indirect business interest in the Academy?					
	Yes □	No				
If yes, you will be asked to complete a Declaration of Business Interests Form						
Signa	ture: CBales	Da	te:	$17 \int 9 \int 18$ (no changes to above)		
Please return this to the Principal of the Academy within 7 days for insertion in the Register of Business Interests.						





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REGISTER OF BUSINESS INTERESTS

	to be completed by the Principal ar	nd all members of staff who may be in sions at the Academy.
1.	Name Ciaran Tolo	
of the	nember of staff confirm that I have rear requirements of the Academies Fina the Policy have access to a copy for r	
l set ou	ut below my business interests.	
1.	Employment at the Academy (pleas	e tick one box)
	Principal 🗆	Non-teaching staff □
	Teaching staff	
2.	Have you or a related person to you connections/memberships/shares in indirect business interest in the Acad	companies etc which have a direct or
	Yes 🗆	No 🗹
If yes,	you will be asked to complete a Decl	aration of Business Interests Form
Signat	ure: ELelef.	Date: 17 /09/18. (no changes to above)





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REGISTER OF BUSINESS INTERESTS

Form t acadei		ted by all gove	rnors who are N	IOT employed	as members of	staff at the
Name	Por	ERT	DEZLA -SI	PINA		
	7.		re read the notes s of the Academ	10 .00 .0		f this form
1.			i to you any conne Guidance, which l		1. N	Warner Comment
	Yes	K	No			
If yes,	you will be a	sked to comple	ete a Declaration	n of Business o	f Interests Form	
Signa	ture			ate		
				17/9/18)	





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REGISTER OF BUSINESS INTERESTS

Form to be complet academy.	ed by all gover	rnors who are N	OT employed	as members of	staff at the
Name PAU	h CH	(IPCHA	tse_		
As a governor, I con and am aware of th					f this form
 Have you or a as explained i 		to you any conne Guidance, which h			
Yes		No			
lf yes, you will be as	ked to complet	te a Declaration	of Business of	Interests Form	
Signature	1	Di	ate		
Y. CS.	m		17.9.1	8	
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