

THE SALTERNS ACADEMY TRUST REGISTER POLICY

1. Purpose and Scope

This policy details how 'The Salterns Academy Trust' responds to the requirement placed upon it within its Articles of Association, Header Funding Agreement and Individual School Funding Agreements to maintain a Membership Register for its members, directors and governors and a Conflict of Interest Register for all its key decision-making members, directors, governors and staff. The trust has decided to address both these requirements through a single register. This policy describes how this register is structured, presented and maintained. Guidance contained within the following documents has also been used:

- DfE Governors Handbook
- DfE Academies Financial Handbook 2014
- Charity Commission - Conflicts of interest: a guide for It is applicable to the trust and all its schools as defined within The Salterns Academy charity trustees
- Trust Operational Framework.

2. Roles and Responsibility

The Salterns Academy Trust Board of Directors and Local School Governing Bodies are responsible for ensuring that the Trust Membership and Conflict of Interest Register is maintained in accordance with the requirements of this policy. The day to day management of the register will be undertaken by the Lead Clerk to the trust.

The Chair of the Board of Directors, Chairs of the Local Governing Bodies, Executive Headteacher and School Headteachers are responsible for making Trust Members, Trust Directors, School Governors and key trust employees aware of this policy and the need to complete a Trust Membership/Conflict of Interest Statement when appropriate. Each of these groups is fully defined below.

3. Policy

3.1 All trust members, directors, school governors and key trust employees shall complete a Trust Membership/Conflict of Interest Statement for inclusion in the Trust Membership/Conflict of Interest Register.

3.2 Additionally relatives and close friends of any of the persons defined in para 3.1 shall be asked to complete the Conflict of Interest Statement questions where a potential conflict of interest as defined below arises.

3.3 The definition for each of the groups detailed above is as follows:

- Trust Members: the members of the 'The Salterns Academy Trust'. This includes any associate members to the trust.
- Directors: the directors of 'The Salterns Academy Trust Board of Directors'. This includes any associate members to the board of directors.
- School Governors: all the governors comprising the Local Governing Bodies for each of the trusts schools. This includes any associate members to the Local Governing Bodies.
- Key Trust Employees: All employees who are authorised through the trust delegation of authority hierarchy to commit funds or commit to contractual requirements on behalf of the trust. These individuals only complete the Conflict of Interest element of the Trust Membership/Conflict of Interest Statement unless they are also a director or governor.
- Relatives and Close Friends: Any immediate relative or very close friend of any of the above where a possible conflict of interest as defined below may exist.

3.4 A single register shall be maintained for The Salterns Academy Trust. This will be co-ordinated by the Chair of the Board of Directors supported by the Clerk to Trust.

- 3.5 The register shall be made available for external viewing through the trust and school websites. Personal addresses shall not be made available for public viewing.
- 3.6 The 'Trust membership/Conflict of Interest Statement' shall be used to detail potential conflicts of interest by addressing the following statements/questions:
- I am a Member of the following Bodies within the Trust. More than one option exists and can be indicted by each individual as sometimes persons qualify under more than one criteria. (e.g. the Executive Headteacher qualifies as an associate member of the trust, as a director, as a governor and as a key employee).
 - My Personal Details. Basic personal details including original register record date and latest amendment date.
 - Name any other charity or educational establishment where you are employed or act as a trustee/governor.
 - Name any business where you are a shareholder, director or employee that may conduct business with the trust
 - Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?
 - Is there any other conflict of interest that you are aware of?
 - Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.
- 3.7 The 'Trust Membership/Conflict of Interest Statement' shall also be used to record that members, directors and governors agree that the trust may upon request from the Secretary of State for Education provide their personal details to the Secretary of State for Education.
- 3.8 When individuals leave the trust their Conflict of Interest Statement shall be held on record until the end of the following financial year.
- 3.9 The 'Trust Membership/Conflict of Interest Register' shall comprise two sections:
- Part 1 shall be a summary of each named person under the following headers. Individuals under each heading shall be listed alphabetically.
 - Trust Members
 - Trust Board Directors
 - ALNS Local Governing Body
 - Trafalgar Local Governing Body
 - Key ALNS Staff Members
 - Key Trafalgar Staff Members
 -
 - Part 2 will contain the individual 'Trust Membership/Conflict of Interest Statements'.
- 3.10 The pro forma for Part 1 of the register is as per Annex 1 of this policy. The pro forma for Part 2 of the register is as per Annex 2 of this policy. The pro forma for the Trust Membership/Conflict of interest Statements is as per Annex 3 of this policy.

**The Salterns Academy
Trust Membership/Conflict of Interest Register**

Part 1: Summary of Conflict of Interest Statements on Record

The Salterns Academy Trust has several layers of governance and all individuals who serve or are associates to them are required to declare any possible conflicts of interest that they may have. The trust maintains this single register which is available through the trust and individual school websites of all such persons. This section of the document summarises alphabetically all individuals under each group heading. Each group is fully defined within the Trust Conflict of Interest Policy.

The Salterns Academy Trust

Full Members: David Giles
 Mike Park
 Scott Taviner
(Independent member: 2 x vacancies)

Associates: Steven Labeledz
 Adrian Parry

Others on record: Nil

The Salterns Academy Trust Board

Directors: Amanda Barrett
 Claire Copeland
 Andrew Cree
 Felicia Drummond
 Nys Hardingham
 Paul Hayes
 Steven Labeledz
 Tania Osborne
 Maria Phillips
 Sue Wilson
(Trust Appointee: 1 vacancy)

Associates: Adrian Parry (Audit Committee)

Others on record: Nil

ALNS Local Governing Body

Governors: Adetola Adebessin (Staff)
 Jane Beecher (Directors Appointee)
 Nys Hardingham (Headteacher)
 Tina Henley (Co-opted)
 Emma Hughes (Staff)
 Tania Osborne (Parent)
 Robin Parr (Parent)
 Toby Simmonds (Co-opted)
 Helen Surawy (Staff)
 Haden Taylor (Directors Appointee)
 Nathan Waites (Parent)
 Justeen White (Co-opted)
(Directors Appointee: vacancy)

Associates: Christopher Doherty (Senior Deputy Headteacher)
Matthew Hutton (Deputy Headteacher)

Others on record: as in Key ALNS Staff members

Trafalgar Governing Body

Governors: Richard Barlow (Co-opted)
Julie Barratt (Co-opted)
Joanne Bennett (Parent)
Claire Copeland (Headteacher)
Frank Jonas (Co-opted)
Tracy Kyle (Parent)
Steven Labeledz (Executive Headteacher)
Luan Meades (Parent)
Stacey Ryan (Staff)
Sue Wilson (Directors Appointee)
(Directors Appointee: vacancy)

Associates: Nil

Others on record: As in Key Trafalgar Key Staff Members

Key Trust Staff Members

| | |
|---------------|-----------------------------|
| Karen Tyrrell | Finance Manager |
| Roberta Young | Director of Human Resources |

Key ALNS Staff Members

| | |
|---------------------|-----------------|
| Gianni Angio | Catherine Green |
| Lloyd Aquilina | Katie Holness |
| Rebecca Britti | Steven Johnson |
| Davina Cherry | Lewis Kemp |
| Sarah Cooper | Lee Morgan |
| Samantha Easson | Seonaid Oswald |
| Vanessa Etherington | Gerard Rogers |
| Stephen Fenner | Tara Smith |
| John Firth | Julia Wisbey |
| Martin Fuller | Davina Wise |

Key Trafalgar Staff Members

| | |
|--------------------------------|------------------|
| John Beveridge | Aamir Kohli |
| Gemma Cathie (known as Pearse) | Janet Morrison |
| Mark Cathie | Laura Nersessian |
| Lucy Clark | Claire Parsons |
| Amanda Collis | Alice Raeburn |
| Annika Ghose | Catherine Seal |
| Kimberley Jeffery-Davis | Charlene Simms |

**The Salterns Academy
Conflict of Interest Register**

Part 2: Trust Membership/Conflict of Interest Statements on Record

Individual Conflict of Interest Statements completed by those required to do so are held alphabetically within this record. Refer to part 1 for a summary of named individuals by applicable group.

Trust Membership/Conflict of Interest Statement for: *(Insert name)*

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

| Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust? | |
|--|------------------------|
| Name of Person | Nature of relationship |
| | |
| | |
| | |

| Is there any other conflict of interest that you are aware of? | |
|--|------------------------|
| Nature of Conflict | Supporting Information |
| | |
| | |
| | |

| Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement. | |
|--|--------------------|
| Name of Person | Nature of conflict |
| | |
| | |
| | |

| |
|--|
| I agree that the trust may provide my details to the Secretary of State for Education if so requested. |
| <i>Note: This statement only applies to trust members, directors and governors.</i> |

| | |
|-----------|--|
| Signature | |
| Date | |

Trust Membership Potential Conflict of Interest Statement for: DAVID GILES

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---|---|---------------------------------------|---|-----------------------------------|
| The Salterns Academy Trust | The Salterns Academy Trust Board of Directors | Admiral Lord Nelson School Local Governing Body | Trafalgar School Local Governing Body | Admiral Lord Nelson School Key Staff Member | Trafalgar School Key Staff Member |
| ✓ | | | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|---|
| Surname | GILES |
| Forename(s) | DAVID PETER |
| Previous Name(s) | |
| Residential Address/Address of registered office | 40 REMBRANDT CRESCENT SOUTHSEA PO4 0QU |
| Date of entry to register | 4 - 3 - 15 |
| Date of last update/cessation of entry on register | 3 - 3 - 15 |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Academy Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| UNIVERSITY OF PORTSMOUTH | PORTSMOUTH | EMPLOYEE |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

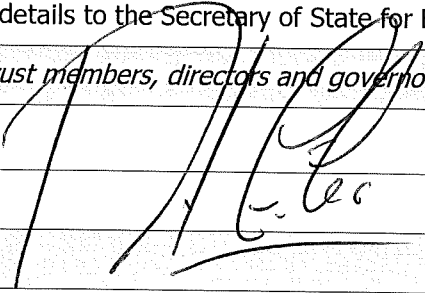
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|--|
| Signature |  |
| Date | 4-3-15 |

Trust Membership/Conflict of Interest Statement for: **MIKE PARK**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| ✓ | | | | | |

| My Personal Details (<i>Individuals who are Key Staff Members only are not required to complete this section</i>) | |
|---|-------------------------------|
| Surname | PARK |
| Forename(s) | MICHAEL WILLIAM |
| Previous Name(s) | — |
| Residential Address/Address of registered office | 112 NORTHOVER ROAD PORTSMOUTH |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| — | — | — |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| — | — | — |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| — | — |
| | |
| | |

Is there any other conflict of interest that you are aware of?

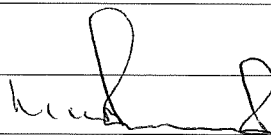
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| — | — |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| — | — |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 4/10/2017 |

Trust Membership/Conflict of Interest Statement for: **SCOTT TAVINER**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| ✓ | | | | | |

| My Personal Details (<i>Individuals who are Key Staff Members only are not required to complete this section</i>) | |
|---|-------------------------------|
| Surname | TAVINER |
| Forename(s) | SCOTT RICHARD |
| Previous Name(s) | |
| Residential Address/Address of registered office | 93 LICHFIELD RD CORNOR PO36DF |
| Date of entry to register | 23-11-16. |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

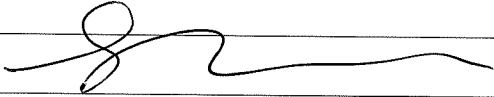
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 23-11-16 |

Trust Membership/Conflict of Interest Statement for: **STEVEN LABEDZ**

| | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| I am a Member of the following Bodies within the Trust | | | | | |
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| ✓ | ✓ | ✓ | ✓ | | |

My Personal Details (*Individuals who are Key Staff Members only are not required to complete this section*)

| | | |
|---|----------------------------|--------|
| Surname | LABEDZ | LABEDZ |
| Forename(s) | STEVEN | STEVEN |
| Previous Name(s) | | ✓ |
| Residential Address/Address of registered office | c/o ALNS | |
| Date of entry to register | | |
| Date of last update/cessation of entry on register | | |
| Amount agreed to pay by way of guarantee (note only applies to The Salterns Trust Members) | A sum not exceeding £10.00 | |

Name any other charity or educational establishment where you are employed or act as a trustee/governor

| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
|---|--|--|
| COMMUNITAS | Purbrookway, Havant UK | TRUSTEE |
| | | |
| | | |

Name any business where you are a shareholder, director or employee that may conduct business with the trust

| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
|---|--|--|
| / | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| / | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| / | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| / | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|------------------|
| Signature | Steven Labedz |
| Date | 25 February 2015 |

Trust Membership/Conflict of Interest Statement for: **AMANDA BARRETT**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | ✓ | | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | BARRETT |
| Forename(s) | AMANDA |
| Previous Name(s) | — |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|-----------------|
| Signature | <i>ABarnett</i> |
| Date | <i>27/6/18</i> |

Trust Membership/Conflict of Interest Statement for: **CLAIRE COPELAND**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | ✓ | | ✓ | | ✓ |

 My Personal Details *(Individuals who are Key Staff Members only are not required to complete this section)*

| | |
|---|----------------------------|
| Surname | COPELAND |
| Forename(s) | CLAIRE ALICE DANIELLE |
| Previous Name(s) | BROWN |
| Residential Address/Address of registered office | CARE OF THE SCHOOL |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

Name any other charity or educational establishment where you are employed or act as a trustee/governor

| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
|---|--|--|
| N/A | | |
| | | |
| | | |

Name any business where you are a shareholder, director or employee that may conduct business with the trust

| Name of Business | Address of Business | Role for Business |
|------------------|---------------------|-------------------|
| N/A | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| <i>N/A</i> | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| <i>N/A</i> | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| <i>N/A</i> | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|-------------------|
| Signature | <i>Cooperland</i> |
| Date | <i>21/9/18</i> |

Trust Membership/Conflict of Interest Statement for: **ANDREW CREE**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | ✓ | | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|-----------------------------------|
| Surname | CREE |
| Forename(s) | ANDREW MARTIN |
| Previous Name(s) | — |
| Residential Address/Address of registered office | 11 EAST LODGE, CATSFIELD, FAREHAM |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|--|--|
| Name of Business | Address of Business | Role for Business |
| UTC PORTSMOUTH | UTC PORTSMOUTH HILSEA PORTSMOUTH | Founding Member |
| SOLENT LOCAL ENTERPRISE PARTNERSHIP | | Committee member of employment and skills board. |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|--|
| Signature | |
| Date | |

Trust Membership/Conflict of Interest Statement for: **FELICIA DRUMMOND**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| X | X | | | | |

| My Personal Details (<i>Individuals who are Key Staff Members only are not required to complete this section</i>) | |
|---|----------------------------------|
| Surname | Drummond |
| Forename(s) | Felicia |
| Previous Name(s) | Shepherd |
| Residential Address/Address of registered office | 3 Spencer Road, Southsea PO4 9RN |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| National Citizens Service | Pembroke Building, Kensington Village, Avonmore Road, London W14 8DG | Board Member |
| Citizen Advice Portsmouth | 2-3 Ark Royal House, Winston Churchill Avenue, Portsmouth PO1 2GF | Board Member |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|--|----------------------------|
| Name of Business | Address of Business | Role for Business |
| SE Region Veterans Advisory and Pension Committee | Norcross Thornton Cleveleys FY5 3WP | Chair (public appointment) |
| | | |
| | | |

| Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust? | |
|--|------------------------|
| Name of Person | Nature of relationship |
| No | |
| | |

| Is there any other conflict of interest that you are aware of? | |
|--|------------------------|
| Nature of Conflict | Supporting Information |
| No | |
| | |

| Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement. | |
|--|--------------------|
| Name of Person | Nature of conflict |
| No | |
| | |
| | |

| |
|--|
| I agree that the trust may provide my details to the Secretary of State for Education if so requested. |
| <i>Note: This statement only applies to trust members, directors and governors.</i> |

| | |
|-----------|--------------------------------|
| Signature | Felicia Drummond (by email) |
| Date | 25 th February 2019 |

Trust Membership/Conflict of Interest Statement for: **NYS HARDINGHAM**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | ✓ | ✓ | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | HARDINGHAM |
| Forename(s) | NYSRANE LOUISA |
| Previous Name(s) | ABIDAON |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| n/a | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| n/a | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| No. | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

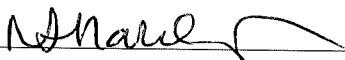
| Nature of Conflict | Supporting Information |
|--------------------------|------------------------|
| None that I am aware of. | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| No. | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 5.7.18 |

Trust Membership/Conflict of Interest Statement for: **PAUL HAYES**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | ✓ | | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|--|
| Surname | HAYES |
| Forename(s) | PAUL KELVIN |
| Previous Name(s) | — |
| Residential Address/Address of registered office | FLAT 20, PARADE VIEW MANSIONS, PORTSMOUTH |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| UNIVERSITY OF PORTSMOUTH | PORTSMOUTH | RE EDUCATION. |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|---------------------|
| Name of Business | Address of Business | Role for Business |
| UNIVERSITY OF PORTSMOUTH SERVICES LTD | PORTSMOUTH. | PRO VICE-CHANCELLER |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| LTC PORTSMOUTH | A member for UoP. |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---------------|
| Signature | Paul Hayes |
| Date | 27 - 6 - 2018 |

Trust Membership/Conflict of Interest Statement for: **TANIA OSBORNE**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | ✓ | ✓ | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | OSBORNE |
| Forename(s) | TANIA |
| Previous Name(s) | |
| Residential Address/Address of registered office | 4 Foxley Drive |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| NA | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

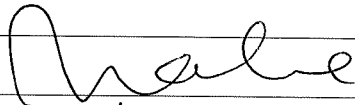
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 20/6/18. |

Trust Membership/Conflict of Interest Statement for:

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | X | | | | |

| My Personal Details (<i>Individuals who are Key Staff Members only are not required to complete this section</i>) | |
|---|-----------------------------------|
| Surname | PHILLIPS |
| Forename(s) | MARIA LOUISE |
| Previous Name(s) | HAMBLETON |
| Residential Address/Address of registered office | 17 ISLAY GARDENS, COSHAM, PO6 3UF |
| Date of entry to register | 01/05/2018 |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

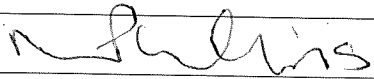
| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

| Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust? | |
|--|------------------------|
| Name of Person | Nature of relationship |
| | |
| | |
| | |

| Is there any other conflict of interest that you are aware of? No | |
|---|------------------------|
| Nature of Conflict | Supporting Information |
| | |
| | |
| | |

| Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement. | |
|--|--------------------|
| Name of Person | Nature of conflict |
| | |
| | |
| | |

| |
|--|
| I agree that the trust may provide my details to the Secretary of State for Education if so requested. |
| <i>Note: This statement only applies to trust members, directors and governors.</i> |

| | |
|-----------|---|
| Signature |  |
| Date | 16/04/2018 |

Trust Membership/Conflict of Interest Statement for: **SUSAN WILSON**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | ✓ | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|--------------------------------------|
| Surname | WILSON |
| Forename(s) | SUE WILSON |
| Previous Name(s) | FURMSTON |
| Residential Address/Address of registered office | 25, SAVERNAKE WAY, FAIROAK, SO50 7FA |
| Date of entry to register | |
| Date of last update/cessation of entry on register | 1/9/17 |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| NORTHERN PARADE SCHOOLS | Doyle Ave. Wilsea, Portsmouth PO2 9NE | EXECUTIVE HEAD. |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust <i>N/A.</i> | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust? *No*

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of? *No*

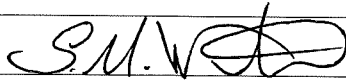
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement. *No*

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | <i>13th SEPTEMBER 2018</i> |

Trust Membership/Conflict of Interest Statement for: **ADRIAN PARRY**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | ✓ (Audit Ctte) | | | | |

| My Personal Details (<i>Individuals who are Key Staff Members only are not required to complete this section</i>) | |
|---|--|
| Surname | Parry |
| Forename(s) | Adrian John |
| Previous Name(s) | None |
| Residential Address/Address of registered office | Flat 6, Cedar Court, 47 Outram Road, Southsea, Po5 1QS |
| Date of entry to register | 7 January 2019 |
| Date of last update/cessation of entry on register | N/A |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|---|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| University of Portsmouth | University House Winston Churchill Avenue Portsmouth PO1 2UP | Executive Director of Corporate Governance |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| None | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| None | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| None | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| None | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|--|
| Signature |  |
| Date | 7 January 2019 |

Trust Membership/Conflict of Interest Statement for: **ADETOLA ADEBESIN**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | ✓ | | | |

My Personal Details *(Individuals who are Key Staff Members only are not required to complete this section)*

| | |
|---|----------------------------|
| Surname | ADEBESIN |
| Forename(s) | TOLA |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

Name any other charity or educational establishment where you are employed or act as a trustee/governor

| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
|---|--|--|
| / | | |
| | | |
| | | |

Name any business where you are a shareholder, director or employee that may conduct business with the trust

| Name of Business | Address of Business | Role for Business |
|------------------|---------------------|-------------------|
| / | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|----------------|
| Signature | <i>Althea</i> |
| Date | <i>20.6.18</i> |

Trust Membership/Conflict of Interest Statement for: **JANE BEECHER**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | ✓ | | | |

 My Personal Details *(Individuals who are Key Staff Members only are not required to complete this section)*

| | |
|---|---------------------------------|
| Surname | BEECHER |
| Forename(s) | JANE |
| Previous Name(s) | |
| Residential Address/Address of registered office | 26, Allens Rd, Southsea, PO400B |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 20.6.18. |

Trust Membership/Conflict of Interest Statement for: **Tina Henley**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | ✓ | | | |

My Personal Details (*Individuals who are Key Staff Members only are not required to complete this section*)

| | |
|---|----------------------------|
| Surname | HENLEY |
| Forename(s) | TINA |
| Previous Name(s) | N/A |
| Residential Address/Address of registered office | 40 Civic Offices |
| Date of entry to register | 13/2/2019 |
| Date of last update/cessation of entry on register | N/A |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

Name any other charity or educational establishment where you are employed or act as a trustee/governor

| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
|---|--|--|
| N/A | | |
| | | |
| | | |

Name any business where you are a shareholder, director or employee that may conduct business with the trust

| Name of Business | Address of Business | Role for Business |
|------------------|---------------------|-------------------|
| N/A | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| NO | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

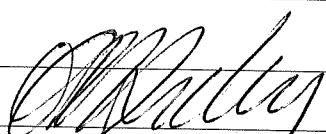
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| NONE | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| NO | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 12/2/19 |

Trust Membership/Conflict of Interest Statement for: **EMMA HUGHES**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | ✓ | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | HUGHES |
| Forename(s) | EMMA |
| Previous Name(s) | HILL / PARKES |
| Residential Address/Address of registered office | 30 WILDMOOR WALK PO9 5QZ |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

| Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust? | |
|--|------------------------|
| Name of Person | Nature of relationship |
| | |
| | |
| | |

NO

| Is there any other conflict of interest that you are aware of? | |
|--|------------------------|
| Nature of Conflict | Supporting Information |
| | |
| | |
| | |

| Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement. | |
|--|--------------------|
| Name of Person | Nature of conflict |
| | |
| | |
| | |

NO

| |
|--|
| I agree that the trust may provide my details to the Secretary of State for Education if so requested. |
| <i>Note: This statement only applies to trust members, directors and governors.</i> |

| | |
|-----------|-----------------|
| Signature | <i>E Hughes</i> |
| Date | <i>27-2-19</i> |

Trust Membership/Conflict of Interest Statement for: **ROBIN PARR**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | ✓ | | | |

 My Personal Details *(Individuals who are Key Staff Members only are not required to complete this section)*

| | |
|---|------------------------------|
| Surname | PARR. |
| Forename(s) | ROBIN LEE |
| Previous Name(s) | - |
| Residential Address/Address of registered office | 12 WAINWING ROAD, BERRYMOUTH |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

Name any other charity or educational establishment where you are employed or act as a trustee/governor

| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
|---|--|--|
| SOUTH DOWNS NATIONAL FOOTBALL CLUB | SOUTH DOWNS CAROL MIDWICKS, GU24 9DN | Company Secretary |
| | | |
| | | |

Name any business where you are a shareholder, director or employee that may conduct business with the trust

| Name of Business | Address of Business | Role for Business |
|------------------|---------------------|-------------------|
| - | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| — | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

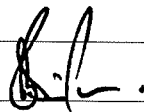
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| — | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| — | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 20/6/18 |

Trust Membership/Conflict of Interest Statement for: **TOBY SIMMONDS**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | ✓ | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|--------------------------------|
| Surname | SIMMONDS |
| Forename(s) | Toby |
| Previous Name(s) | |
| Residential Address/Address of registered office | 30 Allcot Road Parkwith PO35DF |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| Copnor Junior School | Copnor Rd. | Governor (co opted) |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---------------|
| Signature | T. S. J. |
| Date | 20 June 2018. |

Trust Membership/Conflict of Interest Statement for: **HELEN SURAWY**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | ✓ | | | |

 My Personal Details *(Individuals who are Key Staff Members only are not required to complete this section)*

| | |
|---|----------------------------|
| Surname | BARNES (SURAWY) |
| Forename(s) | HELEN |
| Previous Name(s) | BARNES |
| Residential Address/Address of registered office | 140 DOVER RD PO3 6JY |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

Name any other charity or educational establishment where you are employed or act as a trustee/governor

| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
|---|--|--|
| | | |
| | | |
| | | |

Name any business where you are a shareholder, director or employee that may conduct business with the trust

| Name of Business | Address of Business | Role for Business |
|------------------|---------------------|-------------------|
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--|-----------------------------|
| Daughter currently a pupil in the school ALNS | - Kate Suramy ALNS roll. |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---------------------------|
| Signature | <i>K. Suramy (Barnes)</i> |
| Date | <i>20.6.18</i> |

Trust Membership/Conflict of Interest Statement for: **HAYDEN TAYLOR**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | ✓ | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | TAYLOR |
| Forename(s) | HAYDEN BRENT |
| Previous Name(s) | |
| Residential Address/Address of registered office | 2 MILITARY RD, PO352S |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| PORTSMOUTH COLLEGE | TANGIER ROAD, PO36PZ | CORPORATION MEMBER |
| ARUNDEL COURT PRIMARY SCHOOL | | GOVERNOR. |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|--|-------------------|
| Name of Business | Address of Business | Role for Business |
| DULOC LEARNING LIMITED | PORTSMOUTH COLLEGE TANGIER ROAD, PO36PZ | DIRECTOR. |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

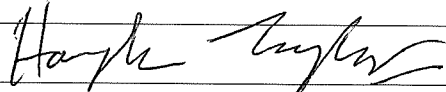
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 20/06 18 |

Trust Membership/Conflict of Interest Statement for: **NATHAN WAITES**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | ✓ | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | WAITES |
| Forename(s) | NATHAN |
| Previous Name(s) | |
| Residential Address/Address of registered office | 15 ARRAN CLOSE, PO6 300 |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|---|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| THE DECURCI TRUST | c/o SPRINGFIELD SCHOOL, CENTRAL RD, PO616Y | CHIEF FINANCIAL & OPERATING OFFICER |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| / | / | / |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| — | — |
| | |
| | |

Is there any other conflict of interest that you are aware of?

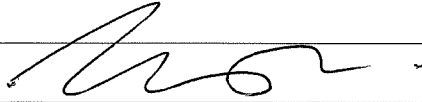
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| ONLY EMPLOYMENT | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| — | — |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 20/06/18. |

Trust Membership/Conflict of Interest Statement for: **JUSTEEN WHITE**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | ✓ | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|---|
| Surname | WHITE |
| Forename(s) | JUSTEEN MARIE |
| Previous Name(s) | WALKER |
| Residential Address/Address of registered office | 43 LOWER DRAYTON LANE PORTSMOUTH PO62EW |
| Date of entry to register | ↗ |
| Date of last update/cessation of entry on register | ↗ |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 ↗ |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| HAMPSHIRE COUNTY COUNCIL. | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

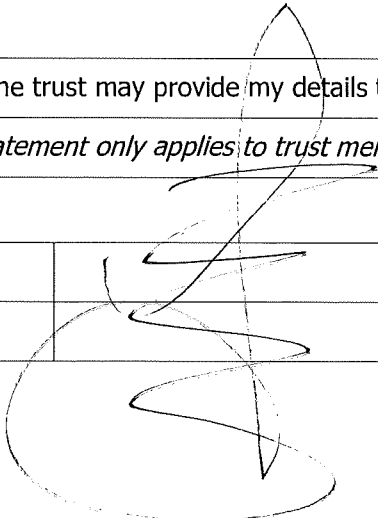
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 20.6.18 |

Trust Membership/Conflict of Interest Statement for: **CHRISTOPHER DOHERTY**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | N/A | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | N/A | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|-------------------|
| Signature | <i>C. Roberts</i> |
| Date | <i>18/9/16</i> |

Trust Membership/Conflict of Interest Statement for: **MATTHEW HUTTON**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

 My Personal Details *(Individuals who are Key Staff Members only are not required to complete this section)*

| | |
|---|----------------------------|
| Surname | HUTTON |
| Forename(s) | MATTHEW DAVID |
| Previous Name(s) | — |
| Residential Address/Address of registered office | 7 MEADOW EDGE, |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

Name any other charity or educational establishment where you are employed or act as a trustee/governor

| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
|---|--|--|
| N/A | | |
| N/A | | |
| N/A | | |

Name any business where you are a shareholder, director or employee that may conduct business with the trust

| Name of Business | Address of Business | Role for Business |
|------------------|---------------------|-------------------|
| N/A | | |
| N/A | | |
| N/A | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |
| N/A | |
| N/A | |

Is there any other conflict of interest that you are aware of?

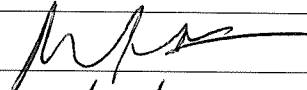
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |
| N/A | |
| N/A | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | |
| N/A | |
| N/A | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 5/7/18. |

Trust Membership/Conflict of Interest Statement for: **RICHARD BARLOW**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | ✓ | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | BARLOW |
| Forename(s) | RICHARD |
| Previous Name(s) | — |
| Residential Address/Address of registered office | 30 CHETWYND ROAD, PO4 0NB |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| HAVANT + SOUTH DOWNS COLLEGE | COLLEGE ROAD, HAVANT | DEPUTY PRINCIPAL |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

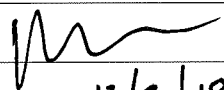
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 13/9/18 |

Trust Membership/Conflict of Interest Statement for:

| | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| I am a Member of the following Bodies within the Trust | | | | | |
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | |

| | |
|---|---|
| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
| Surname | BARRATT |
| Forename(s) | JULIE |
| Previous Name(s) | |
| Residential Address/Address of registered office | 23 COLUMBINE WAY, CLANFIELD PO8 0WJ. |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| | | |
|---|--|--|
| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| | | |
|--|---------------------|-------------------|
| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

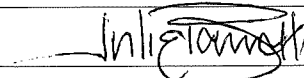
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 13 September 2018 |

Trust Membership/Conflict of Interest Statement for: **JOANNE BENNETT**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | ✓ | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|--|
| Surname | BENNETT |
| Forename(s) | JOANNE LOUISE |
| Previous Name(s) | |
| Residential Address/Address of registered office | 176 NORTHERN PARADE, HILLSEA, PORTSMOUTH, PO2 9LT. |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------------------|--|
| Name of Business | Address of Business | Role for Business |
| Portsmouth City Council | Civic Offices, Guildhall Square | Head of Business Growth, Relationships & Support |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

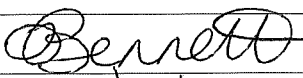
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 13/9/18. |

Trust Membership/Conflict of Interest Statement for: TRACY KYLE

| | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| I am a Member of the following Bodies within the Trust | | | | | |
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | ✓ | | |

| | |
|---|-------------------------------------|
| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
| Surname | KYLE |
| Forename(s) | TRACY |
| Previous Name(s) | |
| Residential Address/Address of registered office | 6 STATION ROAD, PORTSMOUTH, PO3 5BG |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|---|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| ALDINGBOURNE TRUST | Aldingbourne Country Centre, Chichester, PO1 2QJF | SUPPORT WORKER |
| PORTSMOUTH PARENT VOICE | FRANK SORRELL CENTRE | VOLUNTEER PARENT REP |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 13/09/18 |

Trust Membership/Conflict of Interest Statement for: LUAN MEADES.

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | ✓ | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|-------------------------------------|
| Surname | MEADES |
| Forename(s) | LUAN |
| Previous Name(s) | DAVIES |
| Residential Address/Address of registered office | 6 LYDNEY CLOSE, PORTSMOUTH, PO6 3QG |
| Date of entry to register | 13/09/2018 |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 13/09/2018 |

Trust Membership/Conflict of Interest Statement for: **STACEY RYAN**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | ✓ | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | RYAN (FERRETT). |
| Forename(s) | STACEY. |
| Previous Name(s) | |
| Residential Address/Address of registered office | C/O Trafalgar School. |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | N/A | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | N/A | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| _____ | NA _____ |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| _____ | NA _____ |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|-----------------|--------------------|
| _____ NA/ _____ | _____ |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 28/2/19. |

Trust Membership/Conflict of Interest Statement for: **KAREN TYRRELL**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|------------------------------------|
| Surname | TYRRELL |
| Forename(s) | KAREN |
| Previous Name(s) | MAYLOTT |
| Residential Address/Address of registered office | 23 GATLONKE AVE PORTSMOUTH PO3 5NG |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| No | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| No | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|------------|
| Signature | K. Tyndall |
| Date | 19/2/19 |

Trust Membership/Conflict of Interest Statement for: **ROBERTA YOUNG**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | YOUNG. |
| Forename(s) | ROBERTA LESLEY. |
| Previous Name(s) | SAWYER. |
| Residential Address/Address of registered office | SALTERNS ACADEMY TRUST. |
| Date of entry to register | FEBRUARY 2015 |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| NA. | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

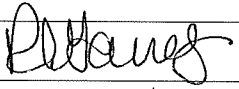
| Nature of Conflict | Supporting Information |
|--|------------------------|
| SON WORKS FOR ^{PW} Priced UK. | |
| DAUGHTER-IN-LAW WORKS FOR DELOITTE | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 17/9/18. |

Trust Membership/Conflict of Interest Statement for: **GIANNI ANGIO**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 28/9/15 |

Trust Membership/Conflict of Interest Statement for: **LLOYD AQUILINA**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| | |
|---|----------------------------|
| My Personal Details (<i>Individuals who are Key Staff Members only are not required to complete this section</i>) | |
| Surname | Aquilina |
| Forename(s) | Lloyd |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | 19/2/19 |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | NA |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | NA |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | NA |

Is there any other conflict of interest that you are aware of?

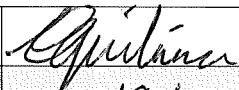
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | NA |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | NA |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 19/02/2019 |

Trust Membership/Conflict of Interest Statement for: **REBECCA BRITTI**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

 My Personal Details *(Individuals who are Key Staff Members only are not required to complete this section)*

| | |
|---|--------------------------------------|
| Surname | BRITTI |
| Forename(s) | REBECCA |
| Previous Name(s) | PENTNEY |
| Residential Address/Address of registered office | 3 KNOTGRASS RD, LOCKS HEATH, SO716XH |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

Name any other charity or educational establishment where you are employed or act as a trustee/governor

| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
|---|--|--|
| N/A | | |
| | | |
| | | |

Name any business where you are a shareholder, director or employee that may conduct business with the trust

| Name of Business | Address of Business | Role for Business |
|------------------|---------------------|-------------------|
| N/A | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

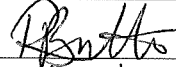
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 5/7/18 |

Trust Membership/Conflict of Interest Statement for: **DAVINA CHERRY**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A. | | |
| | | |
| | | |

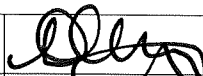
| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |
| | | |
| | | |

| Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust? | |
|--|------------------------|
| Name of Person | Nature of relationship |
| N/A. | |
| | |
| | |

| Is there any other conflict of interest that you are aware of? | |
|--|------------------------|
| Nature of Conflict | Supporting Information |
| N/A. | |
| | |
| | |

| Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement. | |
|--|--------------------|
| Name of Person | Nature of conflict |
| N/A. | |
| | |
| | |

| |
|--|
| I agree that the trust may provide my details to the Secretary of State for Education if so requested. |
| <i>Note: This statement only applies to trust members, directors and governors.</i> |

| | |
|-----------|---|
| Signature |  |
| Date | 24/9/15 |

Trust Membership/Conflict of Interest Statement for: **SARAH COOPER**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | ✓ | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|--------------------------------|
| Surname | COOPER |
| Forename(s) | SARAH |
| Previous Name(s) | |
| Residential Address/Address of registered office | c/o ADMIRAL LORD NELSON SCHOOL |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A. | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A. | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

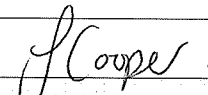
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A. | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 25/9/18. |

Trust Membership/Conflict of Interest Statement for: **SAMANTHA EASSON**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details (<i>Individuals who are Key Staff Members only are not required to complete this section</i>) | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N.A | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N.A | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N.A | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

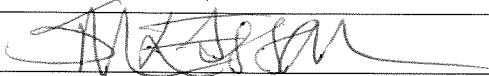
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N.A | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N.A | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 28/9/15 |

Trust Membership/Conflict of Interest Statement for: **VANESSA ETHERINGTON**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | ETHERINGTON |
| Forename(s) | VANESSA |
| Previous Name(s) | BLOCK (JONES) |
| Residential Address/Address of registered office | 28 DEUILLES CLOSE, HAVANT |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| / | N/A | / |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| / | / |
| N/A | |
| | |

Is there any other conflict of interest that you are aware of? NO

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| / | / |
| N/A | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| / | / |
| N/A | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---------------|
| Signature | U Ethenington |
| Date | 17. 9. 18 |

Trust Membership/Conflict of Interest Statement for: **STEPHEN FENNER**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | FENNER |
| Forename(s) | STEVE |
| Previous Name(s) | |
| Residential Address/Address of registered office | 32 NARD ROAD, SOUTHEA |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | N/A | N/A |
| N/A | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | N/A | N/A |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust? **No**

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | N/A |
| | |
| | |

Is there any other conflict of interest that you are aware of? **No**

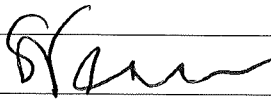
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | N/A |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 31/7/18 |

Trust Membership/Conflict of Interest Statement for: **JOHN FIRTH**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | FIRTH |
| Forename(s) | JOHN |
| Previous Name(s) | |
| Residential Address/Address of registered office | % ALNS |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

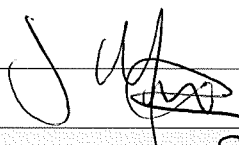
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 25/2/19. |

Trust Membership/Conflict of Interest Statement for: **MARTIN FULLER**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | Fuller |
| Forename(s) | Martin |
| Previous Name(s) | |
| Residential Address/Address of registered office | Care of School |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | N/A | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | N/A | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | N/A |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 1.10.18 |

Trust Membership/Conflict of Interest Statement for: **CATHERINE GREEN**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor <i>N/A None</i> | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

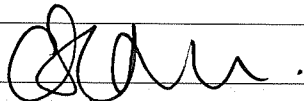
| Name any business where you are a shareholder, director or employee that may conduct business with the trust <i>N/A. None.</i> | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

| Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust? No | |
|--|------------------------|
| Name of Person | Nature of relationship |
| | |
| | |
| | |

| Is there any other conflict of interest that you are aware of? No | |
|--|------------------------|
| Nature of Conflict | Supporting Information |
| | |
| | |
| | |

| Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement. No | |
|--|--------------------|
| Name of Person | Nature of conflict |
| | |
| | |
| | |

| |
|--|
| I agree that the trust may provide my details to the Secretary of State for Education if so requested. |
| <i>Note: This statement only applies to trust members, directors and governors.</i> |

| | |
|-----------|---|
| Signature |  |
| Date | 18/9/15. |

Trust Membership/Conflict of Interest Statement for: **KATIE HOLNESS**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|---|
| Surname | HOLNESS |
| Forename(s) | KATIE |
| Previous Name(s) | GRANT / PAYNE |
| Residential Address/Address of registered office | SUNNYSIDE COTTAGE, VAPTON ROAD CLIPPING DEPT SUSSEX BN17 9LW |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| / | |
| | N/A |
| | |

Is there any other conflict of interest that you are aware of?

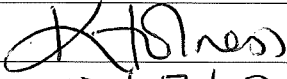
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| / | |
| | N/A |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| / | |
| | N/A |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 17/7/18 |

Trust Membership/Conflict of Interest Statement for: **STEVEN JOHNSON**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

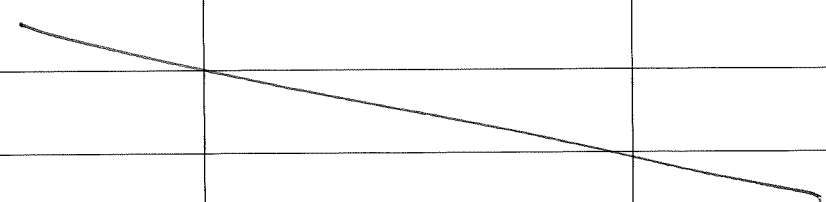
My Personal Details (*Individuals who are Key Staff Members only are not required to complete this section*)

| | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

Name any other charity or educational establishment where you are employed or act as a trustee/governor

| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
|---|--|--|
| WESTOVER PRIMARY SCH | WESTOVER ROAD BAFFINS, PORTSMOUTH | GOVERNOR. |
| LITTLE ADMIRALS PLEB SCH | ALNS, DUNOAS LANE PORTSMOUTH | CHAIR PERSON |
| | | |

Name any business where you are a shareholder, director or employee that may conduct business with the trust

| Name of Business | Address of Business | Role for Business |
|--|---------------------|-------------------|
|  | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| PAULA JOHNSON | WIFE. |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| NONE | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| NONE | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 9/7/18 |

Trust Membership/Conflict of Interest Statement for: **LEWIS KEMP**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | KEMP |
| Forename(s) | LEWIS |
| Previous Name(s) | |
| Residential Address/Address of registered office | SALTERNS ACADEMY TRUST |
| Date of entry to register | 19/12/19 |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| NA | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| NA | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | NA |
| | |

Is there any other conflict of interest that you are aware of?

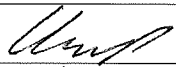
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | NA |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | NA |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 19/2/19 |

Trust Membership/Conflict of Interest Statement for: **LEE MORGAN**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|-----------------|------------------------|
| CAROLINE MORGAN | SPOUSE |
| | |
| | |

Is there any other conflict of interest that you are aware of?

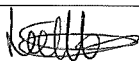
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 18/09/2015 |

Trust Membership/Conflict of Interest Statement for: **SEONAIID OSWALD**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details (<i>Individuals who are Key Staff Members only are not required to complete this section</i>) | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| NIL | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| NIL | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| NIL | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| NIL | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| NIL | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|------------------------|
| Signature | <i>S. B. O'Connell</i> |
| Date | <i>28 Sep 15</i> |

Trust Membership/Conflict of Interest Statement for: **GERARD ROGERS**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | ROGERS |
| Forename(s) | GERARD |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| / | | |
| / | | |
| / | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| / | | |
| / | | |
| / | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| / N/A / | |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| / NO / | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| / NO / | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 5/7/18 |

Trust Membership/Conflict of Interest Statement for: **TARA SMITH**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 9/7/18 |

Trust Membership/Conflict of Interest Statement for: **JULIA WISBEY**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | WISBEY |
| Forename(s) | JULIA ANN |
| Previous Name(s) | FIRTH |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| NICK WISBEY | HUSBAND |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| / | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| / | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 4th MARCH '19 |

Trust Membership/Conflict of Interest Statement for: **DAVINA WISE**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | ✓ | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|---|
| Surname | WISE |
| Forename(s) | DAVINA ALICIA |
| Previous Name(s) | GOODRIDGE |
| Residential Address/Address of registered office | 39 SOUTHERN ROAD, WEST END, SOUTHAMPTON |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | | |
| NA | | |
| NA | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| NA | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|----------------|
| Signature | <u>D. Wise</u> |
| Date | 5th July 2018. |

Trust Membership/Conflict of Interest Statement for: **JOHN BEVERIDGE**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|---|
| Surname | BEVERIDGE |
| Forename(s) | JOHN |
| Previous Name(s) | |
| Residential Address/Address of registered office | 41 GRANGE ROAD, NORTH END PORTSMOUTH PO2 8BG |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|----------------------------|
| Signature | John Beveridge |
| Date | 13 TH SEPT 2018 |

Trust Membership/Conflict of Interest Statement for: *GEMMA CATHIE (PEARSE)*

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details (<i>Individuals who are Key Staff Members only are not required to complete this section</i>) | |
|---|----------------------------------|
| Surname | <i>CATHIE (KNOWN AS PEARSE)</i> |
| Forename(s) | <i>GEMMA</i> |
| Previous Name(s) | <i>PEARSE</i> |
| Residential Address/Address of registered office | <i>74 HASLEMERE ROAD, PO48BA</i> |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| MARK CATHIE | SPOUSE |
| | |
| | |

Is there any other conflict of interest that you are aware of?

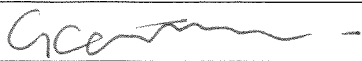
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 29/9/15 |

Trust Membership/Conflict of Interest Statement for: **MARK CATHIE**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details (<i>Individuals who are Key Staff Members only are not required to complete this section</i>) | |
|---|----------------------------|
| Surname | CATHIE |
| Forename(s) | MARK DOUGLAS |
| Previous Name(s) | / |
| Residential Address/Address of registered office | CARE OF TRAFALGAR SCHOOL |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| / | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| / | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| GEMMA CATHIE | SPOUSE |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| / | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| / | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 28/2/19 |

Trust Membership/Conflict of Interest Statement for: **LUCY CLARK**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | CLARK |
| Forename(s) | LUCY |
| Previous Name(s) | |
| Residential Address/Address of registered office | TRAFALGAR SCHOOL |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |

Is there any other conflict of interest that you are aware of?

| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|----------|
| Signature | CCh |
| Date | 13/09/18 |

Trust Membership/Conflict of Interest Statement for: **AMANDA COLLIS**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| / | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| / | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 28/4/18 . |

Trust Membership/Conflict of Interest Statement for: *Annika Ghose*

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details (<i>Individuals who are Key Staff Members only are not required to complete this section</i>) | |
|---|----------------------------|
| Surname | |
| Forename(s) | |
| Previous Name(s) | |
| Residential Address/Address of registered office | |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee (<i>note only applies to The Salterns Trust Members</i>) | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

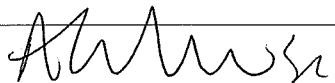
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 29/9/15. |

Trust Membership/Conflict of Interest Statement for: **KIMBLERLEY JEFFERY-DAVIS**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | JEFFERY - DAVIS |
| Forename(s) | KIMBERLEY |
| Previous Name(s) | |
| Residential Address/Address of registered office | _____ |
| Date of entry to register | _____ |
| Date of last update/cessation of entry on register | _____ |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| / | |
| | N/A |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| / | |
| | N/A |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| / | |
| | N/A |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 21 / 9 / 18 |

Trust Membership/Conflict of Interest Statement for: **AAMIR KOHLI**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | Kohli |
| Forename(s) | Aamir |
| Previous Name(s) | Amer Mushfaq |
| Residential Address/Address of registered office | TRAFALGAR SCHOOL |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |

Is there any other conflict of interest that you are aware of?

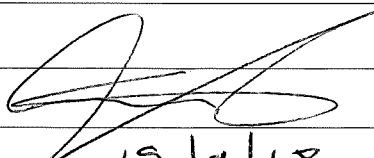
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 19/9/18 |

Trust Membership/Conflict of Interest Statement for: **JANET MORRISON**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | MORRISON |
| Forename(s) | JANET LILIAN |
| Previous Name(s) | COLLINGS / WILLIAMS |
| Residential Address/Address of registered office | TRAFALGAR SCHOOL |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

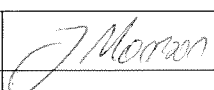
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 13/9/18 |

Trust Membership/Conflict of Interest Statement for: **LAURA NERSSESIAN**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | NERSSESIAN |
| Forename(s) | LAURA |
| Previous Name(s) | |
| Residential Address/Address of registered office | 30 MAPEKING RD, PORTSMOUTH |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| N/A | |

Is there any other conflict of interest that you are aware of?

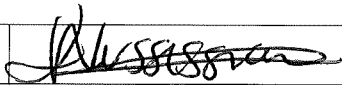
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| N/A | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| N/A | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 20/9/18. |

Trust Membership/Conflict of Interest Statement for: **CLAIRE PARSONS**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | PARSONS |
| Forename(s) | CLAIRE SARAH |
| Previous Name(s) | CLAIRE SARAH DAVIES |
| Residential Address/Address of registered office | TRAFALGAR SCHOOL |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| N/A. | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| N/A | | |

Trust Membership/Conflict of Interest Statement for: **ALICE RAEBURN**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|---|
| Surname | Raeburn |
| Forename(s) | Alice |
| Previous Name(s) | NA |
| Residential Address/Address of registered office | Trafalgar school, Portsmouth PO2 9RJ |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | NA | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | NA | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| NA | |
| | |
| | |

Is there any other conflict of interest that you are aware of?

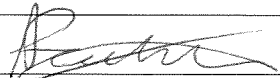
| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| NA | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.


| Name of Person | Nature of conflict |
|----------------|--------------------|
| NA | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 13.09.18 |

Trust Membership/Conflict of Interest Statement for: **CATHERINE SEAL**

| I am a Member of the following Bodies within the Trust | | | | | |
|---|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
|  | | | | | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | SEAL |
| Forename(s) | CATHERINE |
| Previous Name(s) | JENNINGS |
| Residential Address/Address of registered office | TRAFALGAR SCHOOL |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| | |
| | |
| | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| | |
| | |
| | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| | |
| | |
| | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 28-09-18 |

Trust Membership/Conflict of Interest Statement for: **CHARLENE SIMMS**

| I am a Member of the following Bodies within the Trust | | | | | |
|--|---------------------------------|---------------------------|--------------------------------|-----------------------|----------------------------|
| The Salterns Trust | The Salterns Board of Directors | ALNS Local Governing Body | Trafalgar Local Governing Body | ALNS Key Staff Member | Trafalgar Key Staff Member |
| | | | | | ✓ |

| My Personal Details <i>(Individuals who are Key Staff Members only are not required to complete this section)</i> | |
|---|----------------------------|
| Surname | Simms |
| Forename(s) | Charlene |
| Previous Name(s) | |
| Residential Address/Address of registered office | Trafalgar School |
| Date of entry to register | |
| Date of last update/cessation of entry on register | |
| Amount agreed to pay by way of guarantee <i>(note only applies to The Salterns Trust Members)</i> | A sum not exceeding £10.00 |

| Name any other charity or educational establishment where you are employed or act as a trustee/governor | | |
|---|--|--|
| Name of Charity/Educational Establishment | Address of Charity/Educational Establishment | Role for Charity/Educational Establishment |
| | | |
| | NA | |
| | | |

| Name any business where you are a shareholder, director or employee that may conduct business with the trust | | |
|--|---------------------|-------------------|
| Name of Business | Address of Business | Role for Business |
| | | |
| | NA | |
| | | |

Are you a relation of or in a relationship with any school employee, trust member, trust director or school governor within the trust?

| Name of Person | Nature of relationship |
|----------------|------------------------|
| <i>N/A</i> | |

Is there any other conflict of interest that you are aware of?


| Nature of Conflict | Supporting Information |
|--------------------|------------------------|
| <i>N/A</i> | |

Do any of your relations or close friends have any conflict of interest as defined in the above questions? If so please detail their name below and complete another Conflict of Interest Statement for them and attach to this statement.

| Name of Person | Nature of conflict |
|----------------|--------------------|
| <i>N/A</i> | |

I agree that the trust may provide my details to the Secretary of State for Education if so requested.

Note: This statement only applies to trust members, directors and governors.

| | |
|-----------|---|
| Signature |  |
| Date | 13-9-18. |