

Name: RASHMI MAIKWANI

Role at TTLT CAB MEMBER / MEMBER

Employment, office, trade, profession or vocation (please state if self employed)

NAME OF BUSINESS/ORGANISATION	NATURE OF BUSINESS
RETIRED	

Directorships, partnerships or employment (please list all)

NAME OF BUSINESS/ORGANISATION	NATURE OF INTEREST
NONE	

Governor, Member or Trustee roles at other educational institutions or charities

NAME OF SCHOOL/TRUST/CHARITY	NATURE OF LINK
NONE	

Personal relationships (including spouse/partner and close relatives)

NAME OF GOVERNOR, TRUSTEE, MEMBER OR TRUST EMPLOYEE	NATURE OF THE RELATIONSHIP	NATURE OF THE INTEREST ARISING FROM THIS RELATIONSHIP
NONE		

NAME OF GOVERNOR, TRUSTEE, MEMBER OR TRUST EMPLOYEE	NATURE OF THE RELATIONSHIP	NATURE OF THE INTEREST ARISING FROM THIS RELATIONSHIP

Relevant business or personal interests of spouse/partner and close relatives

NAME	RELATIONSHIP TO YOU	RELEVANT INTEREST
None		

Signature: _____

Please remember to advise the trust when any changes occur

