

## TPM – Contact data form

**School name**

**Status** – Voluntary Aided / Voluntary Controlled / Community / Foundation/ Academy/Free School \*

**Denomination if appropriate** – Church of England / Catholic / Methodist \* Pupils on Roll

\*Circle as appropriate

Financial year end

DofE number

**School Address**

**Main Contact**

**Email**

**Telephone**

**Fax (if one)**

**Head Teacher name**

**Head Teacher email**

**School Bursar / Business Manager name**

**Email**

**Site Supervisor name**

**Site Supervisor mobile (if one)**

**Site supervisor email (if one)**

<b>Consultant / Architect if applicable</b>	<b>Firm</b>	<input style="width: 60%;" type="text"/>
	<b>Contact Name</b>	<input style="width: 60%;" type="text"/>

I authorise DBE Services to use any of the above contact details in relation to delivering services to maintain or repair the above school. I accept and agree that they may share these details with any contractor, consultant or organisation to enable work, or the planning/preparation for work, at the above school. I have the authority to provide this information. I confirm that the school will inform you immediately if there is any change to the above data.

Signed : \_\_\_\_\_ Print name: \_\_\_\_\_

Position: \_\_\_\_\_ Date: \_\_\_\_\_

