Grace Mary Primary School

Learning and Growing Together
Hand in Hand

Governor Visit reference form

Name of Governor visiting the school: _____

Governor Role: _____

Date of Visit: _____

Time and Duration of Visit: _____

Purpose of Visit: _____

School Staff involvement/meeting with: _____

Comments regarding visit to school – any pertinent points?

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Comments (continued, if needed)

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Date of feedback to full Governing Body _____

Signed _____ Governor

Date _____

Signed _____ Member/s of Staff meeting with Governor

Date _____

Signed _____ Headteacher

Date _____