

GOVERNORS’ ALLOWANCES POLICY

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| **Approval Date:** | **Autumn 2021** |
| **Review Date:** | **Autumn 2024** |

**POLICY & PROCEDURE**

1. Governors will be eligible to claim allowances providing the allowances are incurred in carrying out their duties as a Governor or representative of Churchfields, the Village School, and are agreed by the Management Committee.
2. Governors will be able to claim for the following, on a case-by-case basis and with the prior approval of the Management Committee:

* The extra costs they may incur in performing their duties;
* The cost of travel relating only to travel to meetings/training courses at the Local Authority (LA) rate per mile, which does not exceed the specified rates for school personnel;
* Travel and subsistence costs, payable at the current rates specified by the Local Authority when attending national meetings or training events, unless these costs can be claimed from the LA or any other source.

The Governing Body at Churchfields, the Village School acknowledges that:

* Governors may not be paid attendance allowance;
* Governors may not be reimbursed for loss of earnings.

Governors wishing to make claims under these arrangements, once prior approval has been sought from the Management Committee, should complete a claims form (obtainable from the school office), attaching receipts, and return it to the School within two weeks of the date when the allowances were incurred, when they will be submitted for approval by the Management Committee for final approval.

Claims will be subject to independent audit and may be investigated by the Chair of Governors (or Chair of Management Committee in respect of the Chair of Governors) if they appear excessive or inconsistent.

This policy will be reviewed annually.

*Churchfields, the Village School*

**Governor Expenses Claim Form**

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **Claim Period** |  |
| **Date** |  |

I claim the total sum of £……….......… for governor expenses as detailed below. I have attached relevant receipts to support my claim.

Signed…………………………………………………………………………………………………………

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| Reason for Expenditure: | £ | p |
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|  |  |  |
|  |  |  |
|  |  |  |
| TOTAL EXPENSES CLAIMED |  |  |

**This form should be submitted to the Headteacher.**

|  |  |
| --- | --- |
| *Authorising signature:* |  |
| *Date authorised:* |  |
| *Date processed:* |  |
| *Date received:* |  |
| *Receiving signature:* |  |