



Appointment of Director

Company Name: **THE DAVID ROSS EDUCATION TRUST**

Company Number: **06182612**



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## New Appointment Details

Date of Appointment: **21/03/2019**

Name: **MRS CHRISTINE ESTELLE COUNSELL**

The company confirms that the person named has consented to act as a director.

Service Address: **DAVID ROSS EDUCATION TRUST HEAD OFFICE  
CHARNWOOD COLLEGE  
THORPE HILL  
LOUGHBOROUGH  
ENGLAND  
LE11 4SQ**

Country/State Usually Resident: **ENGLAND**

Date of Birth: **\*\*/06/1962**

Nationality: **BRITISH**

Occupation: **EDUCATION CONSULTANT**

## Authorisation

### Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Administrator, Administrative Receiver, Receiver, Receiver manager, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor