**ECF Facilitator Expression of Interest**

Please complete the form below to express your interest in facilitating the ECF programme, please return this to TSH@tgacademy.org.uk

|  |  |
| --- | --- |
| Name: |  |
| Email: |  |
| Phone number: |  |
| School: |  |
| Would your school be willing to host training events? |  |
| Phase / Specialism: |  |
| Location preference\* | Solihull | Warwickshire | Worcestershire |
| Position and length of time position has been held: |  |
| Why you are interested in undertaking this kind of work:  |  |
| Your experiences to date: |  |
| Additional information you would like to include: |  |

\*facilitating in this locality is not guaranteed