

## **Headteacher Undertaking \***

I			
On behalf of			
Address	_		
agree to			
support  Masters schola	arship programme	in their application to th	ne Culham St Gabriel'
and			
		for three days pe undertake their Masters study.	r annum for the next
Signed:			_
Date:			
Contact email address	S:		
Contact phone number	er:		
	ou have emailed the applic	ant to say you have completed this ication. Yes No	form. The applicant

This form can be completed electronically with an electronic signature and emailed to enquiries@cstg.org.uk

\*If you work in more than one school you must have the agreement of all headteachers. They will each need to complete a form. If you lead and teach RE across a MAT or cluster of schools you must have the signed agreement of your MAT lead, Executive Head or Principal as appropriate.

