|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of Local Chaplaincy Committee: | |  | | | |
| **Name of School(s):** | | | | | |
| **MINUTES** | | | | | |
| Date: | | Venue: | | | Time: |
| Present: | | | | | |
| Apologies: | | | | | |
| ***Item*** | ***Discussion*** | | ***Action Who?*** | ***Due Date*** | |
| Minutes of last meeting |  | |  |  | |
| Business Arising |  | |  |  | |
| Chaplaincy Report(s) |  | |  |  | |
| Correspondence In & Out |  | |  |  | |
| Treasurer’s Report |  | |  |  | |
| Event Planning |  | |  |  | |
| General Business |  | |  |  | |
| Next Meeting / /2017 |  | |  |  | |
| Close |  | |  |  | |