



Appointment of Director

Company Name: **THE QUALITY ASSURANCE AGENCY FOR HIGHER EDUCATION**

Company Number: **03344784**



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New Appointment Details

Date of Appointment: **14/06/2023**

Name: **PROFESSOR ODETTE HUTCHINSON**

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

Service Address: **12A MOSTRAGEE ROAD
STRANOCUM
BALLYMONEY
NORTHERN IRELAND
BT53 8PT**

Country/State Usually Resident: **NORTHERN IRELAND**

Date of Birth: ****/10/1975**

Nationality: **BRITISH**

Occupation: **PRO VICE CHANCELLOR**

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