

## INITIAL SAFEGUARDING INCIDENT REPORT FORM

### 1. Personal Information

Name: _____	Date of Birth: ___/___/___
Ethnicity: _____	Male / Female (circle one)
Disability/Relevant Medical Conditions (if any): _____	
Address: _____	
_____	Post Code: _____
School Child Attends: _____	
Parent or Career's Name: _____	
Parent or Career's Home Phone No: _____	Mobile Phone No: _____

### 2. Incident / Report / Disclosure Details

Date of Incident: ___/___/___	Time: _____	Venue: _____
Brief Details of Incident: _____		
_____		
_____		
_____		
If the child / young person made direct disclosure, describe the circumstances and record what the child said (using their words): _____		
_____		
_____		
If concerns arise from your observations / actions, give details: _____		
_____		

### 3. Details of others

Name, role, relationship to the child /person and contact details (if known) of any alleged person(s): _____
_____
Name, role and contact details (if known) of any potentials witnesses to the incident: _____
_____
Details of any actions taken, include name, role, agency and contact number for person(s) with whom this information has been shared, including parents. Include details of any actions agreed: _____
_____
_____

### 4. Your Details

Name: _____	Role: _____
Contact number: _____	
Signature: _____	Date: ___/___/___

### 5. Complete and return

<p>Please forward this form to Welfare</p> <p>Please ensure confidentiality and share your concerns on a strict need-to-know basis and only in order to protect this child / person and other children.</p> <p>You may wish to seek reassurance by discussing your concerns with someone outside the club/</p> <p>The NSPCC provides a free 24-hour service on 0808 800 5000 or Hampshire Police on 101</p>
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