

Report form for recording concerns and referrals

Please complete as much information as you can. If the incident relates to one child please fill in as below. If it refers to more than one child please give as much information as you can about each child.

Name of person(s) against whom allegations have been made: _____

Age, or approximate age, if known: _____

Address: _____

Phone number: _____

Club: _____ Position in club: _____

Child's name: _____ Age/date of birth: _____

Gender: _____ Ethnicity: _____

Parent or carer name: _____

Address: _____

Phone number: _____

Child's relationship with club: _____

Your details

Name: _____

Address: _____

Phone number: _____

Club: _____

Position in club: _____

Are you reporting your own concerns? Yes No

If not, please give details of person who has raised concerns:

Brief details of concern or incident:

Have you spoken to the person against whom any allegations have been made? Yes No

If so what has been said?

Have you spoken to the child? Yes No

If so, please detail what has been said:

Have you spoken to the parents? Yes No

If so, please detail what has been said:

Please detail any action taken to date

Have the statutory agencies been informed? Yes No Date of referral:

If so, please give contact details : _____

Your signature: _____

Date: _____