

REPORT OF CONCERN ABOUT A CHILD/YOUNG PERSON

STRANDTOWN BAPTIST CHURCH



CONFIDENTIAL

Use this form to record any concern you have about a child. If you need help in completing this form please talk to the leader in charge or the Safeguarding Co-ordinator. The completed form will be given by the leader to the Safeguarding Co-ordinator.

YOUNG PERSON'S NAME DATE OF BIRTH

ADDRESS

POSTCODE

PARENT/GUARDIAN NAME HOME PHONE

DATE OF INCIDENT TIME OF INCIDENT

NATURE OF CONCERN (SEQUENCE OF EVENT/ACTUAL WORDS USED/OBSERVATIONS, WHY ARE YOU CONCERNED, FROM WHOM DID YOU RECEIVE INFORMATION AND WHEN); ANY PHYSICAL, BEHAVIOURAL OR OTHER SIGNS?

ACTION TAKEN (INCLUDING PERSONS CONTACTED) HAS THE CHILD BEEN SPOKEN TO & WHAT WAS SAID?

DETAILS OF PERSON REPORTING CONCERN

NAME PHONE NO

ADDRESS

POSTCODE

SIGNATURE: DATE: