

## Incident Case Log Form

1). Please follow the guidelines on reporting allegations or suspicions as laid out in the Safeguarding Policy.

2). Please complete this form in block capital letters. This form must be completed as soon as possible after receiving information that causes concern about the welfare or the protection of a child.

Once you have completed this form please hand in to Reception where it will be dealt with accordingly and kept confidential.

<b><u>Person reporting the allegation:</u></b>			
Name :			
Job Title:			
Date/Time/Place of allegation received :			
Contact Number:			
E:mail :			
<b><u>Student details:</u></b>			
Name:		Gender:	
Date of birth:			
Nationality :			
Type of Incident :			
Date & Time of Incident:			
Where incident took place:			

<b><u>Person Accused:</u></b>			
Name:		Gender:	
Contact details (if known):			
<b>Summary of the Incident:</b> (state exactly what the child alleged)			
<b>Action Taken:</b> (including all concerned parties)			
<b>Declaration:</b>	All of the above facts are true and accurate of the child protection incident :		
Name:			
Signed:			
Date:			

