

## Reporting a Safeguarding Concern, Allegation or Disclosure

Is an immediate response required? If “yes”, complete referrals to the police and/or social services first	Yes <input type="checkbox"/> No <input type="checkbox"/>
Name of referrer	
Role of referrer	
Contact information of referrer	
Name of victim	
Club member?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Date of birth/age of victim	
Contact information for the victim	
Parent/carer information if victim is a child	
Name of Alleged Perpetrator	
Is the alleged perpetrator a Club member?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Date of birth/age of perpetrator	
Contact information of perpetrator	
Parent/carer information if perpetrator is a child	
Reason for referral: what is alleged to have occurred and how was the concern identified? (e.g., was this a disclosure of abuse, observed interaction, third party report, etc.?)	
Date, time, and location of incident/disclosure.	

Perpetrator immediately suspended from role?	
Category of abuse	Emotional <input type="checkbox"/> Physical <input type="checkbox"/> Sexual <input type="checkbox"/> Financial <input type="checkbox"/>
Witnesses? (roles & contact details)	
Does the victim know about this referral?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has the adult victim provided consent for this referral? Has the parent/carer of a child victim been notified? <b>DO NOT NOTIFY IF IMPLICATED IN ALLEGED ABUSE</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Time and date of referral	
Signature of referrer	

Referred to Police? (Please include contact information and incident number)	
Referred to Social Services? (Please include contact information)	
Refer to Local Authority Designated Officer (LADO)? (Please include contact information)	