

Volunteer/Company Coordinator Form for reporting concerns about a child

Please fill in this form with as much factual information as possible. However, do not delay passing the form on if you do not have some of the information.

School:		
Name of Child:		
Gender:	Age:	Date of Birth:

Your details:

Your name:	Your position:	Date:
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Are you reporting your own concerns or responding to concerns raised by someone else? (delete as appropriate):

Reporting own concerns / Responding to concerns raised by someone else

If you are responding to concerns raised by someone else, please provide their name and position and their place of work:

Please provide details of the incident or concerns you have, including times, dates, description of any injuries, whether information is first hand or the accounts of others, including any other relevant details:

The child's account / perspective:

Please provide details of anyone alleged to have caused the incident or to be the source of any concerns:

Provide details of anyone who has witnessed the incident or who shares the concerns:

Are you aware of any previous incidents or concerns relating to this child and of any current risk management plan/support plan? If so, please provide details:

Has the situation been discussed with the school's Designated Child Protection Officer? Yes/No (delete as appropriate). If so, please summarise the discussion:

Has the situation been discussed with THEBP's Designated Child Protection Officer? Yes/No (delete as appropriate). If so, please summarise the discussion:

Signed: _____

Date: _____

Internal Use Only:

Has the Designated Child Protection Officer informed the statutory child protection authorities?

**Police: Yes/No
 Yes/No**

Local Authority Children's Social Care:

Date & Time: _____

Date & Time: _____

**Name and telephone number of
 Person spoken to:**

**Name and telephone number of
 Person spoken to:**

Signed:	Date & Time:	Name & Position: