

Incident Reporting Form



It is recognised that a child may seek you out to share information about abuse or neglect, or talk spontaneously, individually or in groups when you are present. In these situations you must:

- Listen carefully to the child. DO NOT directly question the child.
 - Give the child time and attention.
 - Allow the child to give a spontaneous account: do not stop a child who is freely recalling significant events.
 - Make an accurate record of the information you have been given using the form below.
 - Use the child's own words where possible.
 - Explain that you cannot promise not to speak to others about the information they have shared.
 - Reassure the child that:
you are glad they have told you: they have not done anything wrong; what you are going to do next.
 - Explain that you will need to get help to keep the child safe
 - DO NOT ask the child to repeat his or her account of events to anyone.
 - When appropriate advise and guidance will be sought from Police/Children's Services.

Your name		Name of Club	
Your role			
Your address			
Phone number		email address	
Child's name		Child's date of birth	
Child's ethnic origin		If the child has any disability please state	
Child's gender Male <input type="checkbox"/> Female <input type="checkbox"/>			
Name and address of Parent/Guardian			
Phone number		email address	
Has Parent/Guardian been notified of this incident? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes provide details of what was said/action agreed			
Are you Reporting your own concerns <input type="checkbox"/> or Responding to concerns raised by someone else <input type="checkbox"/>			
If responding to concerns raised by someone else please provide their name and address			
Position within the sport or relationship to the child:			
Phone number		email address	
Date and time of incident			
Details of the incident or concerns (include other relevant information, such as description of any injuries and whether you are recording this incident as fact, opinion or hearsay).			

Child's account of the incident	
Witness account (if any) of the incident	
Name and address of any witness to the incident Position within the sport or relationship to the child: Date of birth (if under 18yrs) Phone number _____ email address _____	
Details of action taken to date	
Has the incident been reported to any external agencies? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If Yes please provide further details Name of organisation/agency _____ Contact person _____ Phone numbers _____ email address _____ Agreed action or advice given _____ _____ _____	
Your signature Print name	Date