

INCIDENT REPORT FORM

Details of person making the report:

Name:			Date:
Title/Position:			Organisation name:
Contact Numbers:	Mobile:		
	Home:		
	Work:		
Address:			
Email address:			

Details of child affected:

Name:			Date of birth:
Contact numbers: If same as for parent/guardian, use section below:	Mobile:		
	Home:		
	Work:		
Address: If same as for parent/guardian, use section below			

Details of Parent / Guardian

Name:			Relationship to child
Contact numbers:	Mobile:		
	Home:		
	Work:		
Address:			

Details of Adult of Concern (person who complaint/concern is about):

Name:		Date of birth:
Contact numbers:	Mobile:	
	Home:	
	Work:	
Address:		

Please include a summary of the incident/concern below. Please describe any action that has been taken already.

Relevant paperwork and additional sheets should be indicated in the boxes provided and sent to the T&RA Child Protection Officer with this form.

Number of additional sheets attached:	

Other agencies/organisations/individuals informed:

Contact 1	Name and address of organisation / individual	
	Telephone number:	
	Contact person/reference number	
Contact 2	Name and address of organisation / individual	
	Telephone number:	
	Contact person/reference number	

When you have completed the form:

Attach any background documents and send the form to the T&RA Child Protection Officer by email or post.

Remember to telephone the Child Protection Officer directly if you need advice quickly.

If you believe that someone may be at immediate risk, you should contact your local police or social services department. Dial 999 if there is an emergency.

Apart from the local police or social services, you should not discuss this referral with anyone before taking advice from the T&RA Child Protection Officer.

T&RA Child Protection Officer,
Barry Aitken,
The New House, High Street, Porton, Salisbury SP4 0LH
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