[](https://www.theiet.org/)

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| **Safeguarding incident reporting form** |  |
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| |  |  | | --- | --- | | Your name: | Name of organisation: | | Your role: | IET office/local network: | | Contact information (you):  *Address:*  *Postcode:*  *Telephone numbers:*  *Email address:* | | | Child’s name: | Child’s date of birth: | | Child’s ethnic origin:  *Please state* | Does child have a disability:  *Please state* | | Child’s gender:  □ Male  □ Female | | | |
| |  | | --- | | Are you reporting your own concerns or responding to concerns raised by someone else:  □ Responding to my own concerns  □ Responding to concerns raised by someone else  If responding to concerns raised by someone else please provide further information below | | *Name:*  *Position within the organisation or relationship to the child:*  *Telephone numbers:*  *Email address:* | | Date and times 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: |   *Signed: ……………………….*  *Date: \_\_\_/ \_\_\_/\_\_\_\_* | |