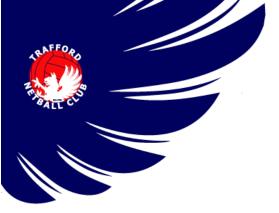
Safeguarding Incident or Concern Report Form





traffordseniornetballclub@gmail.com

- www.traffordnetballclub.co.uk
- @TraffordSeniorNetballClub
- @traffordseniornetballclub
- 🗹 🛛 @traffordsenior1

 \square

0

ß

0

SAFEGUARDING INCIDENT OR CONCERN REPORT FORM

| Your Contact Information (this will be kept confidentially) | | | | |
|---|---------------------------------------|---------------------------------|--|--|
| Your first name | Your Surname | Your Address | | |
| | | | | |
| Daytime/Mobile number | Email Address | Affiliation Number as on ENgage | | |
| | · · · · · · · · · · · · · · · · · · · | | | |
| Club / League Name, or other | Your position /role in netball | Club Chair's Name | | |
| Young Person's Details | | | | |
| First Name | Surname | Date of Birth/Age | | |
| | | | | |
| Male/Female | Ethnic Origin if known | Protected Characteristics | | |
| Male 🛛 Female 🗆 | | | | |
| If the young person has a disability, please give details | | | | |
| | | | | |
| | | | | |
| Name of School (if known) | Contact at School (if known) | Tel No of School (if known) | | |
| | | | | |
| Have the Daronts /Carors been | advised of the incident: YES 🗖 | | | |
| | what has been said, and the res | | | |
| | | | | |
| | | | | |
| First Name of Parents/Carers | Surname of Parents/Carers | Home address | | |
| | | | | |
| Parents/ Carers Tel No | Parents/Carers Email address | Any other information | | |
| | | | | |

TRAFFORD

| Are you reporting your own concerns or responding to concerns raised by someone else | | | | |
|--|--|--|--|--|
| Reporting my own concerns 🗆 🛛 I am responding to someone else's concerns 🗆 | | | | |
| If you are responding to someone else's concerns, please provide their contact information | | | | |
| Person's first name | Person's Surname | Address | | |
| | | | | |
| Tel No | Email Address | Role in netball & Affiliation No (if known) | | |
| | | | | |
| Incident/Concern Information | | | | |
| Date of Incident | Time(s) of Incident | Place of Incident | | |
| | | | | |
| | <i>ride relevant information, what v</i> . by who, please include descript ant information | | | |
| | | | | |
| | | | | |
| ls your concern fact 🗖 opinion | 🗖 or hearsay 🗖 | | | |
| Incident Information – details c | of person whose behaviour you h | nave concerns about | | |
| First Name | Surname | Address | | |
| | | | | |
| | | | | |
| Date of Birth/Age | Contact Number | Email address | | |
| | | | | |
| Club Name & affiliation no if known | Role(s) within Netball, or relationship to the young person | | | |
| | | | | |
| Young person's account of the | incident | | | |
| | | | | |
| | | | | |
| Please provide any witnesses accounts of the incident | | | | |
| | | | | |
| | | | | |
| | | | | |
| Please provide witness(es) con | tact information | | | |
| First Name | Surname | Address | | |
| | | | | |
| Date of Birth/Age | Contact Number | Email address | | |
| | | | | |
| | | | | |

| Club Name | Position(s) within netball, or Relationship to the Young Person | | |
|---|---|-----------------|--|
| | | | |
| Has the incident been reported to any external agencies? YES 🗖 NO 🗖 – <i>if yes</i> , please give details | | | |
| Name of organisation/agency | Contact Person | Contact details | |
| | | | |
| Date of Report | Agreed action or Advice Given by external agency | | |
| | | | |
| Print name | Your Signature | Date | |
| | | | |

Thank you for completing this form.

Please send it to Trafford Club Welfare Officer Reem Taylor and England Netball's Lead Child Protection Officer at England Netball Head Office:

E email: traffordseniornetballclub@gmail.com AND besafe@englandnetball.co.uk, or

SportPark, 3 Oakwood Drive, Loughborough LE11 3QF England Netball Only]