



1.1 Incident Report Form

All Saints GAC:	
Your name:	
Your position:	
Child's name:	
Child's address:	
Parents/carers names and address:	
School:	
Child's date of birth:	
Date and time of any incident:	
Your observations:	
Exactly what the child said and what you said: (Remember, do not lead the child – record actual details. Continue on separate sheet if necessary)	
Action taken so far:	
External agencies contacted (date & time)	
Police yes/no	If yes – which: Name and contact number: Details of advice received:



Social services yes/ no	If yes – which: Name and contact number: Details of advice received:
Governing Body yes/no	Name and contact number: Details of advice received:
Council/Edu. Dept yes/no	If yes – which: Name and contact number: Details of advice received:
Other (e.g. NSPCC)	Which: Name and contact number: Details of advice received:
Signature:	
Print name:	
Date:	

Remember to maintain confidentiality on a *need to know* basis – only if it will protect the child. Do not discuss this incident with anyone other than those who need to know. NB A copy of this form should be sent to social services after the telephone report and to the Designated Officer for monitoring purposes.