**Reporting a Safeguarding Concern Form**

**St Mary’s Church Cholsey**

Please fill this form in and give it to the Safeguarding Officer.

Be as factual as possible.

Write down all the details that you remember.

|  |  |
| --- | --- |
| SAFEGUARDING TEAM DETAILS |  |
| Safeguarding Officer | Alex Hammond |
| Contact Details | 07966458256 |

|  |  |
| --- | --- |
| YOUR DETAILS |  |
| Name: |  |
| Date: |  |
| Telephone number: |  |
| Email address: |  |

|  |  |
| --- | --- |
| WHO? |  |
| Name of person you are concerned about: |  |
| Do they know that you are raising this concern? |  |
| Are they an adult or a child? |  |
| Time and date of disclosure: |  |

|  |  |  |
| --- | --- | --- |
| WHAT? | |  |
| What happened that concerned you? | |  |
|  | | |
| WHERE? |  | |
| Where did this happen? |  | |

|  |  |
| --- | --- |
| WHEN? |  |
| When did this concern happen? |  |

Date of completion:

Signature of person completing the form: