Bluebell Railway Safeguarding Incident Report Form

**To be filled out by the person reporting the concern. Please fill out all the information that is known.**

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| **Name of Child/ Vulnerable Adult** | Click or tap here to enter text. | **Age and DOB****(if known)** | Click or tap here to enter text. |
| **Any special factors****(e.g. disability)** | Click or tap here to enter text. |
| **Parent’s/Carer’s/****Responsible Adult’s Name(s)** | Click or tap here to enter text. |
| **Home Address** | Click or tap here to enter text. | **Telephone number(s)** |
| **Home:**Click or tap here to enter text. |
| **Other:**Click or tap here to enter text. |
| **Venue this incident took place in**  | Click or tap here to enter text. |
| **Exact location where the incident happened** | Click or tap here to enter text. |
| **Description of what has prompted concerns (please include details of any specific incident, dates, times witness details apart from person reporting incident.) and describe any physical or behavioural indicators which have been observed.** |
| Click or tap here to enter text. |
| **Have you or anyone else spoken with the child/vulnerable adult and if so what was discussed?** |
| Click or tap here to enter text. |
| **Have you or anyone else spoken with the parents/carers/or other adult and if so what was said?** |
| Click or tap here to enter text. |
| **To whom reported?** | Click or tap here to enter text. | **Date** | Click or tap to enter a date. |
| **Your name and role** | Click or tap here to enter text. |
| **Signature** | Click or tap here to enter text. | **Date** | Click or tap to enter a date. |

**This section to be completed by Safeguarding Officer**

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| **Any further action taken?** |
| Click or tap here to enter text. |

**Copy of form sent to HR manager: Yes** [ ]  **No** [ ]

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| **Signature** | Click or tap here to enter text. | **Name** | Click or tap here to enter text. | **Date** | Click or tap to enter a date. |