

MEC Safeguarding Incident/Concern Form

Name of child:	
Where the incident/concern occurred:	
Name and position of person completing form (please print):	
Time and Date of incident/concern:	
Description of incident/concern: <i>(NB where a child has made a disclosure, please be aware of the need to not ask leading questions and to only record words that were actually said by the child)</i>	
Action taken	
Is this the first time you have been concerned about this child/young person?Yes/No	
Are the child's parents/carers aware of your concerns?Yes/No	
Reporting Staff Signature:	Date:
Date submitted to Safeguarding Officer:	
Safeguarding Officer Response / Outcome	
Safeguarding Officer Signature	Date