**GDWG Child Safeguarding Report Form (2020)**

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| Staff name and position:   |    |
| Name and DOB of vulnerable child/ren; also address if known   |  |
| Name & contact number of person alleging neglect:   |  |
| Date/time of allegation:   |    |
| Where event was witnessed:   |    |
| Other people present:   |   |
| What happened (record the individual’s own words):  |    |
| Any evidence (e.g. bruising/change in behaviour):  |   |
| Who has been informed, when and what action, if any, was taken:   |    |
| Date and signature   |   |