



For use by Parish Staff Member/Volunteer/Parishioner or Parish Designated Person to record details of a Child Protection concern. A copy of this form must be sent to Parish Designated Person (or Diocesan Delegate). All copies must be filed in secure location.

1. Details of child or alleged victim

Name: _____ Male Female

Address: _____

School: _____ DOB: _____

2. Parent / Carer details (where appropriate)

Name: _____

Address (if different from above): _____

Tel: _____ Mobile: _____

Are they aware of the allegation, suspicion or complaint? Yes No

3. Details of concern, allegation or complaint

(Include dates / times and location the incident(s) occurred, witnesses, if known. Does the child /victim know this referral is being made?)

4. Details of person(s) allegedly causing concern in relation to the child

Name: _____ Male Female

Address: _____

Relationship to child/victim (*parent/Priest/teacher etc*):

CHILD PROTECTION RECORDING FORM

5. Details of person making disclosure/raising concern

Name: _____

Address: _____

Tel: _____ Mobile: _____

Relationship to child or alleged victim: _____

(If you are **not** a Parish Designated Person please complete sections 6 and 7)

6. Reporting

Have you reported this matter to your Parish Designated Person/Diocesan Delegate?

Yes No

If Yes, give details of Designated Person you reported to:

Name: _____

Position/Parish: _____

If no explain why: _____

If no, has the matter been reported to civil authorities? Yes No

Have you reported the matter to any other member of the Church? Yes No

Who was it referred to:

Name: _____ Date Reported: _____

Position/Parish: _____

7. Details of Person completing the form

Name: _____

Tel: _____ Mobile: _____

Church Role: _____

Date: _____ Time: _____

Signed: _____

(If you are a Parish Designated Person please complete sections 8 and 9)

8. Parish Designated Person

Has the matter been referred to civil authorities?

Yes No

How was the referral made? _____

Date: _____

Have you notified the Diocesan Delegate?

Yes No

What actions were agreed and by whom when the matter was referred onto Civil / Church authorities?

Are there any immediate child protection concerns? If so, please record what they are and state what actions have been taken by whom to address them:

9. Details of Parish Designated Person completing the form

Name: _____

Parish: _____

Tel: _____ Mobile: _____

Date: _____ Time: _____

Signed: _____