

## CONCERN RECORDING FORM

- Complete Part A of this form if the concerns relate to the general wellbeing of a child.
- Complete Parts A and B if the concerns relate to possible child abuse.

### **PART A WHERE THERE ARE CONCERNS ABOUT GENERAL WELLBEING OF A CHILD**

Where the concern does not involve the possibility of abuse, worries may be discussed with parents/carers.

Any significant incidents that cause concern about the wellbeing of a child should be recorded and reported to the Club Child Wellbeing and Protection Officer and parents/carers as soon as possible. Seek advice from the CWPO, the Cricket Scotland CWPO or the Safeguarding in Sport service if you are not sure what to do if there are concerns about the general wellbeing of a child.

#### **1. Child's Details**

Name:	Date of Birth:
Address:	School:
Postcode:	
Tel No:	
Preferred Language:	Is an interpreter required? YES / NO
Any Additional Needs?	

#### **2. Details of situation giving rise to concerns (including date, time, location, nature of concern, who, what, where, when, why)**

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#### **3. Details of any witnesses/other people involved (including names, addresses and telephone contacts)**

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#### **4. Details of any injuries (including all injuries sustained, location of injury and action taken.**

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#### **5. Child's views on situation (if expressed). Where possible, please use the child's own words.**

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**PART B WHERE THERE ARE CONCERNS ABOUT THE CONDUCT OF AN ADULT**

**1. Details of person about whom there is a concern**

Name:	Relationship to Child:
Address:	Tel No:
Postcode:	

**2. Details of concerns:** (date, time, location, nature of concern, who, what, where, when, why, continue on a separate sheet if necessary)

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**3. Details of any action taken**

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**4. Details of other persons/agencies contacted:** (including date, time, name of person contacted and advice received)

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**10. Have the child's parents/carers informed? YES/NO If yes, record details / If no please state why not:**

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**Part C – YOUR CONTACT INFORMATION**

**11. Details of Person Recording Concerns**

Name:	Position/Role:
Address:	Tel No:
Postcode:	

