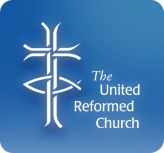
**Appendix 8** **INCIDENT RECORDING FORM** 

**Basic information**

Date and time of incident: ...............................................................................................

Date on which this report was written: ............................................................................

Your full name: ....................................................................................................................................................

Full name of child, young person or adult concerned: ........................................................................................

Address, if known…………………………………………………………………………………………………………

Date of birth, if known…………………………………………………………………………………………………….

Location / Situation: ......................................................................................................................................

.......................................................................................................................................

Other people present: .........................................................................................................................................

.......................................................................................................................................

**Record of incident:**

* Please ensure you are as accurate and detailed as possible. Use quotes wherever possible – do not interpret what was said using your own words.
* Record what you said as well as what the child, young person or adult said.
* Include details such as tone of voice, facial expression and body language.
* If you have formed an opinion please state it, making it clear that it is your opinion and give reasons for forming that opinion.

**Who has been spoken to about the incident?**

Record below the names of all those with whom you have spoken about your concerns:

Local Church Safeguarding Coordinator : ...........................................................................................................

Synod Safeguarding Coordinator: .......................................................................................................................

Childrens / Adult Services: ..................................................................................................................................

Police: .................................................................................................................................................................

NSPCC: ..............................................................................................................................................................

Parent/Carer: ......................................................................................................................................................

Child: ...................................................................................................................................................................

Other (name, role and organisation): ..................................................................................................................

.............................................................................................................................................................................

**Feedback and follow up actions:**

**Signed:** ................................................................................................ **Dated:** ..............................................

**Position held in the church:**..............................................................................................................................

**Signed:** (person who wrote this report)

.......................................................................................................................................

**Dated:** ..........................................................................................................................

