

Last reviewed	March 2024
Next Review Date	March 2025

SAFEGUARDING AND WELFARE POLICY

APPENDIX 1

1. Safeguarding Procedures Record/Referral Form

Please complete as many sections as possible

Ethnicity (if applicable) Any disability? Parent/Carer's details if known) Responsible Adult's details Addresses Permanent/ Correspondence Are you reporting your own concerns or passing on those of someone else? Description of what has prompted concerns (please include details of any specific incidents, dates, times, etc.) Please describe any physical or behavioural indicators which have been observed	Name of student	Age & DOB	
Any disability? Parent/Carer's details if known) Responsible Adult's details Addresses Permanent/ Correspondence Are you reporting your own concerns or passing on those of someone else? Description of what has prompted concerns (please include details of any specific incidents, dates, times, etc.)		Student Number	
Parent/Carer's details if known) Responsible Adult's details Addresses Permanent/ Correspondence Are you reporting your own concerns or passing on those of someone else? Description of what has prompted concerns (please include details of any specific incidents, dates, times, etc.)			
details if known) Responsible Adult's details Addresses Permanent/ Correspondence Are you reporting your own concerns or passing on those of someone else? Description of what has prompted concerns (please include details of any specific incidents, dates, times, etc.)	Any disability?		
Responsible Adult's details Addresses Permanent/ Correspondence Are you reporting your own concerns or passing on those of someone else? Description of what has prompted concerns (please include details of any specific incidents, dates, times, etc.)		·	
Addresses Permanent/ Correspondence Are you reporting your own concerns or passing on those of someone else? Description of what has prompted concerns (please include details of any specific incidents, dates, times, etc.)	Responsible Adult's		
Correspondence Are you reporting your own concerns or passing on those of someone else? Description of what has prompted concerns (please include details of any specific incidents, dates, times, etc.)	Addresses		Telephone number(s)
Are you reporting your own concerns or passing on those of someone else? Description of what has prompted concerns (please include details of any specific incidents, dates, times, etc.)			
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Please describe any physical or behavioural indicators which have been observed	Description of wh	at has prompted concerns (please include details of any specific inci	dents, dates, times, etc.)
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Hav	<u>e you or anyone else spoken w</u>	ith the student, and if so, what was o	discussed?
Наую	you or anyone else snoken with	anyone other than the student, e.g.	next of kin?
Tiave	you or arryone else spoken with	ranyone other than the student, e.g.	, HEAL OF KILLS
What actions	have you taken/do you propos	e to take? Please explain the reasor	ns for your decision.
	The second of the property		
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Name and role of		Date & Time	
person to who			
concern was			
reported (if			
applicable)			

Your name and role		
Your location and contact details		
Signature	Date	