

Child Safeguarding Internal Recording Pro Forma

CONFIDENTIAL
The following information

Full name, including any aliases.	
Gender	
Date of Birth	
Address:	
Who Has Parental Responsibility?	
Details of disclosure or concern, include date, time, full names, actual wording used)	
Any special needs of the child/ren.	
Actions Required	

Project5

Consent Given by child/young person/parent: Yes / No If consent not given, please state clearly reason for overruling the need for consent.	
Follow Up	
Your Name	
Your Role	
Signature	
Date, time and place:	

Our commitment to protecting children and young people is set out in our [Safeguarding Policy](#) which can be accessed at www.project5.org/safeguarding