

Kuk Sool Won™ England Schools

Safeguarding Incident Form



If a safeguarding concern has been raised, this form must be completed and handed to the school DWO.

Full Name of Adult Involved	Date of Birth	Your Name and Role in Organisation

Nature of Concern/ Disclosure:

Statement of concern: Please include where you were when the disclosure was made, what you saw, who else was present, what the adult said and what you said. Keep this statement factual.

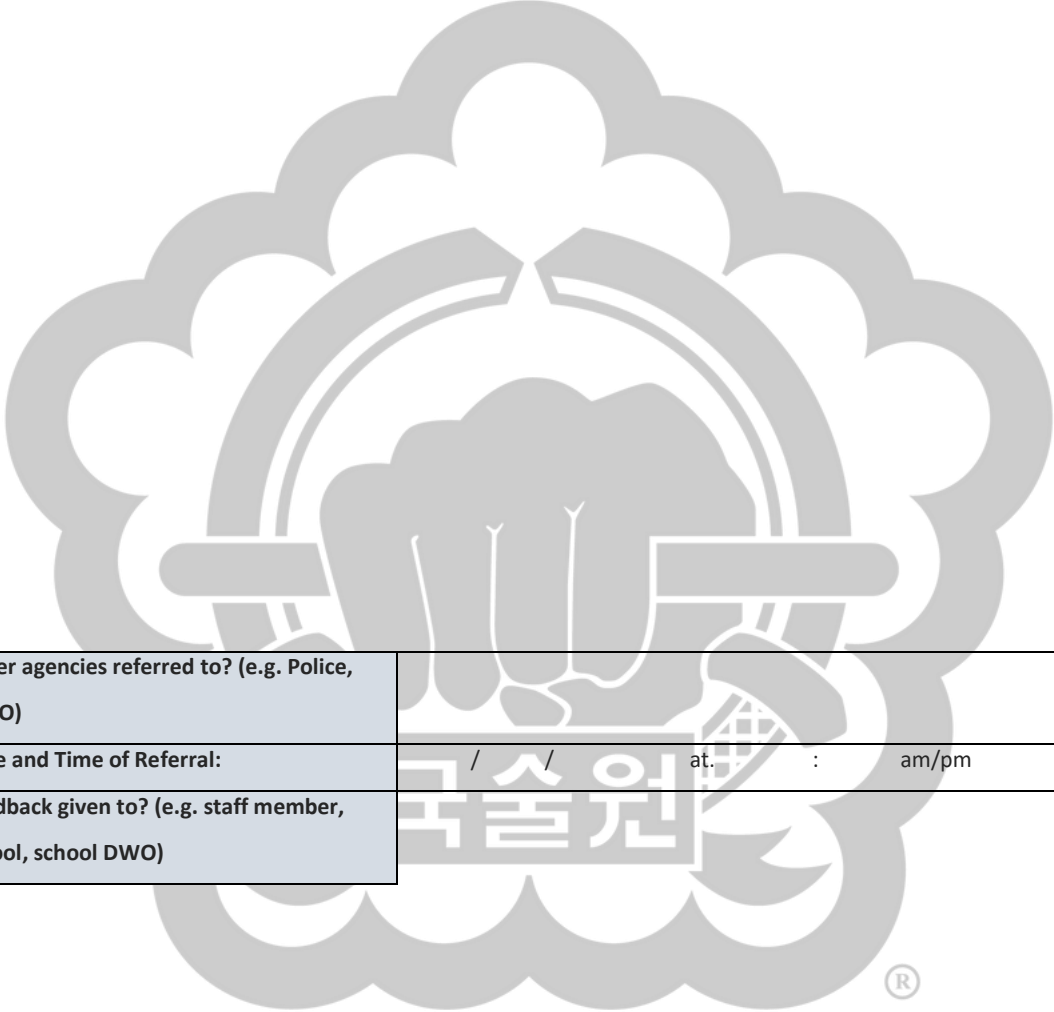

Date and Time of Incident:	/ / at. : am/pm
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Who are you passing this information to?	
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Name and Position:	
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Your Signature:	
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Date and Time form completed:	/ / at. : am/pm
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Date and Time form received by DWO:	/ / at. : am/pm
Action taken by DWO:	
	
Other agencies referred to? (e.g. Police, LADO)	
Date and Time of Referral:	/ / at. : am/pm
Feedback given to? (e.g. staff member, school, school DWO)	
	
Further Action:	
Full Name:	
DWO Signature:	
Date:	/ /