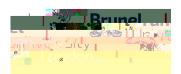
## Safeguarding - Incident Report Form

See paragraph 6.6 of the Safeguarding Children and Vulnerable People Policy for advice on how to complete this form



Date of incident:	
Time of incident (if applicable):	
Place of incident:	
Child/vulnerable person involved:	
Name:	Gender:
D.O.B:	Address:
Telephone:	Nature of injury:
University member involved:	
Project/Event:	
Brief description of what happened (including description of cause of any injury):	
Child or vulnerable person's explanation of what happened:	
Other members present:	
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Signed by reporter:	
Signed by witnesses:	
Date:	
Subsequent Action Taken:	

- On completion please discuss this form with the Designated Safeguarding Officer.
- Attach the original Risk Assessment Form.
- Copy to CGO for record keeping