

SAFEGUARDING REPORTING FORM

Please ensure that people raising an allegation/disclosure/concern are made aware that the matter will be forwarded to the Designated Officer and the civil authorities.

1. About the allegation/disclosure/concern

Date of Disclosure: _____

Time of Disclosure: _____

How was the information received?

Telephone Email Letter In Person

2. About the person making the disclosure

Name -----

Address -----

Contact Details Tel ----- Mobile -----

3. Details of alleged victim

Name ----- DOB ---/---/-----

Address -----

Contact Details Tel ----- Mobile -----

4. Details of alleged perpetrator

Name -----

Address Current -----

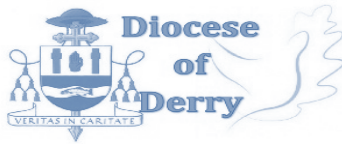
Contact Details Tel ----- Mobile -----

Relationship to victim (i.e. priest, laity, religious order) -----

If Clergy what is their position in the church/religious order -----

Address at time of incident -----

Current contact with children/vulnerable adults (if known) e.g. school governor/youth leader etc.



5. Details of allegations/disclosure/concern

Nature of above

Date if happened -----

Time if happened -----

Where did it happen -----

Has the matter been referred to the civil authorities? Yes No

If yes to whom? -----

Has the person raising the matter been made aware that:

- It will be referred to the civil authorities? Yes No
- This record will be sent to the Diocesan Designated Officers? Yes No

6. Person recording this information

Date of recording

Name (BLOCK CAPITALS)

Signature

Address

Contact Details Tel ----- Mobile -----

Position in Parish ----- Parish of -----

Please forward this immediately to Noel O'Donnell/Celine McKenna

Diocesan Designated Officer
Diocesan Safeguarding Office
164 Bishop Street
Derry
BT48 6UJ