



# SAFEGUARDING REPORT FORM

## THE INCIDENT

- What happened? (Nature of concern / disclosure made - use the person's own words if known)
  
  
  
  
  
  
  
  
  
  
  
  
  
- When did it happen? (date, time)
  
  
  
  
  
- Where did it happen? (specific location)
  
  
  
  
  
- Who was allegedly involved and in what way? (includes witnesses)

Contact details of concerned person or to whom disclosure was given:

Name PRINT:

Telephone

Email

Address



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Contact details of church:

Eastwood Baptist Church, Nobles Green Road, Eastwood, Leigh on Sea, Essex  
SS0 5PY

Name of Designated Person for Safeguarding (DPS) Rosemary Midson  
Contact details of Designated Person for Safeguarding: 01702 528880 or  
07950847938

## INDIVIDUAL OF CONCERN - CONTACT DETAILS

Name PRINT:

Date of birth

Address

Phone number / Email address

## ANY ACTION THAT HAS BEEN TAKEN [To be completed by the DPS/ASO]

- Have the carers or parents / guardians been informed? Yes/No  
If so, when and by whom?
- Have the statutory authorities been informed? Yes/No  
If so, please complete the table:

Authority      Police / Social Services/ Other: details:

Name of Person contacted

Position

Email contact

Phone contact

Contacted by DPS/ASO : name:

Date & time of contact

- Has the Eastern Baptist Association been informed?  
(Please do so if the statutory authorities are involved)
- If so, when and by whom?
- Any other action taken:



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## FUTURE ACTION TO BE TAKEN

- What action needs to be taken?
  
- Who is responsible for this
  
- Other comments:

## **SIGNATURES followed by date and time for each**

Signature of DPS/ASO :

Signature of Safeguarding Trustee:

Signature of Minister: