

Your name

Appendix 1 South Lee School Logging a Concern form for safeguarding concerns

Childs date

Name of student/ person

(Must be hand-written)

Tutor Group/

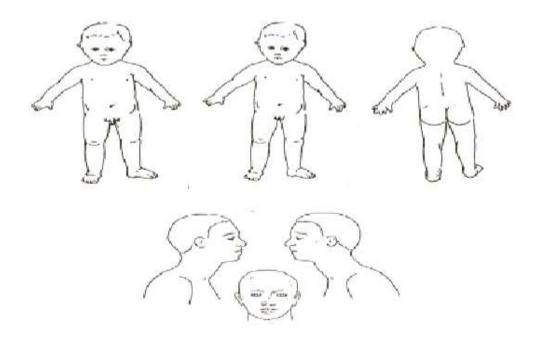
making the disclosure or that you are concerned about			at of I	of birth		Form/Class		(and position in			ool)
			Maturo	of Con-	corn/Dia	e closuro					
Nature of Concern/Disclosure											
	(Rei	member t	o only red	cord fact	DO NOT	add your	own opir	nion)			
Was there an injury?	Yes	No		u see it?		Yes		No			
Describe the injury:											
Have you filled in a body plan to show where the injury Yes No is and its approximate size?											
Was	Yes	No	Who?				I				
anyone else with you?											
Where were	λο∩ς T										
Has this happ before?	ened	Yes	No								
Did you report the Yes		No	То				Do	Date:			
previous incid				Whon		1					
Is the safeguarding concern enabled or dependent on the internet						Yes* No		0			
*If yes, discus that this is red		,	,	•		safety rep	orting flo	w char	t ai	nd e	nsure
Who are you	ormation (nation on to?		Senior Leader	LADO	Polic	е	Customer First			
Please give det	ails inclu	uding their	name and	contact no	umber:						
Name: Time: Date:											

Your Signature:	Date:				
Print Name:					
For use by DSL only:	Date and Time received:				
Summary of Action Taken:					
Referred to:	Recorded on log Ye NC Log ref number:	Date and time completed:			

Appendix 2

NB Staff should not examine a child, but may use this form for recording any observations made within the normal school routine.

Example body map: Age 5 and under



Example body map: Age 5 and over

