

PETROC™

CHILD PROTECTION/SAFEGUARDING INCLUDING PREVENT

Young People and Vulnerable Adults

This form should be passed to the Safeguarding office as soon as you hear about the concern and on the same day

Safeguarding at Petroc is everybody's responsibility

Date of disclosure		Time of disclosure	
Discloser (<i>Learner</i>)	Name:		
Date of birth of discloser		Gender	
Details of any siblings if under the age of 18			
Disclosed to (<i>your name</i>)	Name:		
Witnessed by	Name:		
Location of disclosure	<i>(exact venue i.e. room no. or exact location if off site)</i>		
<p>Details of information disclosed (<i>in the learners words</i>)</p> <p>Must include:</p> <ul style="list-style-type: none"> • Location, date and time of alleged abuse. • Nature of abuse (<i>physical, sexual, neglect or emotional</i>) • Description of any injuries 			
<p>.....</p> <p>Signed (referrer if possible)</p>		<p>.....</p> <p>Date:</p>	