

Little Lady Locks

Charity number: 1195950

Safeguarding Report Form

This form should be used to record safeguarding concerns relating to Children and/or Vulnerable persons.

In an emergency please do not delay in informing the police or social services. All the information must be treated as confidential and reported to the Designated Safeguarding Lead (DSL) within one working day or the next working day if it's a weekend.

The form should be completed at the time or immediately following disclosure, but after all necessary emergency actions have been taken. Please complete the form as fully as possible.

The Designated Safeguarding Lead (DSL) for Little Lady Locks is:

Miss Ashley Higgins Telephone: 0161 879 6809 Email: info@littleladylocks.com

For further information please refer to the Little Lady Locks Safeguarding Policy.

1	Your details	s (the person completing the form)		
Name				
Position				
Telephone				
Email				
2	Details of th	ne person affected		
Name				
Adress				
Telephone				
Email				

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	Include name(s) of alleged perpetrator(s), description of incident(s), dates(s), times(s) and location(s) of incident		
4	Other potential witnesses		
Name			
Adress			
Telephone			
Email			

Details of the incident (please describe in detail using only the facts)



5	Additional relevant information (please detail anything that you believe to be helpful or important)
1 1.	
	ompleted this form and provided information that is factual and does not my own views or opinions on the matter.
	me:
Date:	



For completion by the Designated Safeguarding Lead (DSL)

1	DSL Respon	se		
Action taken by DSL				
Rational for decision making/actions taken				
Outcome of action taken by DSL				
Follow by DSI	up action			
to per	ing the			
OSL nar	ne:			
Signed:				
Date:	rate:			