**Child Safe Standards**

**CONFIDENTIAL RECORD OF CHILD SAFE CONCERN**

|  |  |
| --- | --- |
| **Complainant Name:**(if other than Child) |  |
| **Age: “**Adult” if over 18 |  | **Date Complaint Received:**  / / |
| **Club:** |  |
| **Date notified:** |  |
| **Anonymity?:** | **Does complainant/child wish to remain anonymous?** (Circle) YES NO |

|  |
| --- |
| **Child’s Details** |
| **Full Name:** | *(Use alias if child’s identity needs to be protected)* |
| **Address:** | *(If known and can be disclosed in line with protection requirements)* |
|  |
| **Date of Birth:** |  | **Sex:** |  | **Age at time of alleged offence:** |  |
| **Club:** |  |
| **Parent/Guardian Name:** |  |
| **Parent/Guardian Address:** |  |
| **Parent/Guardian Telephone No.** |  |

|  |
| --- |
| **Person’s reason for complaint/concern (e.g. observation, injury, disclosure)** |
|  |

|  |
| --- |
| **Location of alleged incident(s):** |
|  |
| **Name of Person Complained About** |
| **Full Name:** |  |
| **Date of Birth:** |  | **Sex:** |  | **Age at time of alleged offence:** |  |
| **Club or Association:** |  |
| **Role/Status**  |  o | Administrator (volunteer) | o | Parent |
| ***(in sport)*** |  o | Athlete | o | Spectator |
|  |  o | Coach/Assistant Coach | o | Support Personnel |
|  |  o | Employee  | o | Official |
|  |  o | Other |  |
|  |  |  |  |
|  |  |

|  |
| --- |
| **Alleged Breach(es) of [Child Safety Framework or Equivalent]** |
| [Detail sections of Framework that you believe that the behaviour/conduct/incident(s) may have breached, with particular reference to the [Code of Behaviour/Conduct for dealing with Children or Young People – or equivalent] |
| **Outcome the complainant is seeking:** |
|  |

|  |
| --- |
| **Witnesses (if more than 3 witnesses attach details to this form)** |
| Name (1): |  |
| Contact details: |  |
| Consent to provide details to others?: | YES / NO  |
| Name (2): |  |
| Contact details: |  |
| Consent to provide details to others?: | YES / NO  |
| Name (3): |  |
| Contact details: |  |
| Consent to provide details to others?: | YES / NO  |
| Other notes? |  |
| **Interim action (if any) taken (to ensure Child’s safety and/or to support needs of person complained about)** |
|  |
| **Police Contacted** | Who: |  |
| When: |  |
| Advice provided: |  |
| **Government agency contacted** | Who: |  |
| When: |  |
| Advice provided: |  |
| **Government agency contacted (if more than one)** | Who: |  |
| When: |  |
| Advice provided: |  |
| **RSV Personnel contacted** | Who: |  |
| When: |  |

|  |
| --- |
| **Police and/or Government agency investigation: ADVICE AND/OR FINDING** |
|  |
| **Other reporting?** |
| (e.g., Board, peak State or National Body in your sport, etc.) |
| **Internal investigation (if any): PROGRESS/FINDING** |
|  |

|  |
| --- |
| **Action taken** |
|  |
| **Completed by:** | **Name:** |  |
| **Position in Organisation:** |  |
| **Signature:** |  |  |
| Date: |
| **Signed by:** | Complainant (if not a Child) |

 *This record and any notes must be kept in a confidential place and provided to the relevant authorities (Police and Government) should they require them. This record must be kept for a minimum of seven (7) years.*