

# Child Protection Recording

## Form 15



For use by Parish Staff Member/Volunteer/Parishioner or Diocesan Designated Person(s) to record details of a Child Protection concern. A copy of this form must be sent to the Diocesan Designated Person / Director of Safeguarding. The information on this form is **Confidential**. All copies must be stored in a secure location.

The information on this form will be processed by the Diocese/parish in accordance with its Safeguarding Policies and Procedures and applicable law. It will be stored indefinitely by the Diocese/Parish in accordance with those requirements. Depending on the nature of the data on the form, it may be necessary to disclose some details to the appropriate statutory agencies. For further information, please see the Parish/Diocese Privacy Policy or contact the Data Protection Officer.

1	Details of Child or Alleged Victim
	<p><b>Name:</b> _____ <b>Male:</b> <input type="checkbox"/> <b>Female:</b> <input type="checkbox"/></p> <p><b>Address:</b> _____ _____</p> <p><b>Parish:</b> _____ <b>School:</b> _____ <b>Age:</b> _____</p>
2	Details of Parent / Guardian
	<p><b>Name:</b> _____</p> <p><b>Address:</b> _____ _____</p> <p><b>Tel. No. (Land)</b> _____ <b>Mobile:</b> _____</p> <p><b>Has the Parent/Guardian been made aware of the allegation, suspicion, complaint?</b> Yes: <input type="checkbox"/> No: <input type="checkbox"/></p>
3	Details of concern, allegation, complaint
	<p>Include dates / times and location the incident(s) occurred, witnesses, if known.</p> <p>_____ _____ _____ _____</p>

**Does the child / complainant know this referral is being made?    Yes:     No:**

<b>4</b>	<b>Details of person(s) allegedly causing concern in relation to the child</b>
<p><b>Name:</b> _____ <b>Male:</b> <input type="checkbox"/> <b>Female:</b> <input type="checkbox"/></p> <p><b>Address:</b> _____ _____</p> <p><b>Relationship to the child / complainant</b> (parent, priest, teacher etc.) _____</p>	
<b>If you are not a Parish Safeguarding Rep. please complete sections 5 and 6</b>	
<b>5</b>	<b>Details of Person reporting the concern</b>
<p><b>Name:</b> _____</p> <p><b>Address:</b> _____ _____</p> <p><b>Tel. No. (Land)</b> _____ <b>Mobile:</b> _____</p> <p><b>Relationship to the child / complainant:</b> _____</p>	
<b>6</b>	<b>Who was it reported to?</b>
<p><b>Have you reported this matter to your Parish Safeguarding Rep / Diocesan Designated Person?</b>  <b>Yes:</b> <input type="checkbox"/> <b>No:</b> <input type="checkbox"/></p> <p><b>If Yes, give details of Person you reported to:</b>  <b>Name:</b> _____ <b>Position:</b> _____</p> <p><b>If No, explain why not:</b>          _____          _____</p> <p><b>Has the matter been reported to the civil authorities?</b> <b>Yes:</b> <input type="checkbox"/> <b>No:</b> <input type="checkbox"/></p> <p><b>Have you reported the matter to any other member of the Church?</b> <b>Yes:</b> <input type="checkbox"/> <b>No:</b> <input type="checkbox"/> (if yes give details)</p> <p><b>Who was it reported to :</b></p> <p><b>Name:</b> _____ <b>Date Reported:</b> _____</p> <p><b>Church Role:</b> _____ <b>Tel. No.</b> _____</p>	
<p><b>Signed:</b> _____ <b>Dated:</b> _____ <b>Tel. No.</b> _____</p>	

**If you are a Parish Safeguarding Rep. please complete sections 7 and 8**

<b>7</b>	<b>Who was it reported to?</b>
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**Has the matter been reported to the civil authorities?**      Yes:     No:

**How was the referral made?** (Please give details below)

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**Date of referral:** \_\_\_\_\_

**Have you notified the Diocesan Designated Person / Director of Safeguarding?** Yes:     No:

**What actions were agreed and by whom when the matter was referred to the Civil / Church authorities?**  
(Please give details below)

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**Are there any immediate child protection concerns?**      Yes:     No:

**If yes, please record what they are and state what actions were taken and by whom.**  
(Please give details below)

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<b>8</b>	<b>Details of Parish Safeguarding Representative</b>
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**Print Name:** \_\_\_\_\_ **Parish:** \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Tel. No.** \_\_\_\_\_

SAFEGUARDING OFFICE USE ONLY		Director of Safeguarding/ Designated Liaison Person: Ms Cleo Yates: Tel. 087 3553024 c.yates@killaloediocese.ie
<b>Form Received by</b>		Designated Liaison Person: Fr Pat Malone: Tel. 086 8572023 fr.pat.malone@gmail.com
<b>Date</b>		

<b>Time</b>		Diocesan Office: Tel. 065 682 8638      office @killaloediocese.ie
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