**CAUSE FOR CONCERN FORM**

|  |  |
| --- | --- |
| Student first name(s) |  |
| Student family name(s) |  |
| Group name(s) if known |  |
| Group leader name(s) if known |  |
| Name of person noting concern |  |
| Role / connection with school (for example teacher / AL ?) |  |
| Date and time when concern happened |  |
| Location where concern happened |  |
| Concern (please give as much detail as possible)If you are reporting a disclosure or an allegation made by a student, please use this space to describe what happened using the student’s own words (or as close as you can remember). Please use the other side of this form and additional sheets to write more. Securely fix any extra sheets together. If relevant and visible state the part of the body affected. |  |
| Signed |  |
| Date |  |

**You must not expect or ask a student to either undress or show areas of their body for evidence which cannot be seen under normal clothing.**

Discretion is very important in these cases and, once the incident has been reported, colleagues should not discuss the matter any further with other parties, either now or at any point in the future.

Response to concern: this section to be completed by the DSL or deputy

Do parents / Group Leader / Agent / Homestay / Other need to be informed?

|  |  |  |
| --- | --- | --- |
| Response | By whom (full name) | When (time and date) |
|  |  |  |

**Send the completed .form to** **safeguarding@dusemond.co.uk** **or pass directly to the DSL**