

## **(Appendix 3) IKC SAFEGUARDING CHILDREN INCIDENT REPORT FORM**

The form **MUST** be used in the event of any concerns regarding the safeguarding of children or vulnerable adults.

The form is available from the IKC web site: <https://www.ikc.org.uk/safeguarding/reporting>



# Independent Karate Clubs

## Safeguarding Children Incident Report Form

<b>Your name:</b>	<b>Name of Club/Association:</b>
<b>Your role:</b>	
<b>Contact information (you):</b> <i>Address:</i>  <i>Postcode:</i> <i>Telephone numbers:</i> <i>Email address:</i>	
<b>Child's name:</b>	<b>Child's date of birth:</b>
<b>Child's ethnic origin:</b> <i>Please state</i>	<b>Does child have a disability:</b> <i>Please state</i>
<b>Child's gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>Parent's / carer's name(s):</b>	
<b>Contact information (parents/carers):</b> <i>Address:</i>  <i>Postcode:</i> <i>Telephone numbers:</i> <i>Email address:</i>	
<b>Have parent's / carer's been notified of this incident?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If YES please provide details of what was said/action agreed:	
<b>Are you reporting your own concerns or responding to concerns raised by someone else:</b> <input type="checkbox"/> Responding to my own concerns <input type="checkbox"/> Responding to concerns raised by someone else	
<b>If responding to concerns raised by someone else:</b> <i>Please provide further information below</i> <i>Name:</i>  <i>Position within the sport or relationship to the child:</i>  <i>Telephone numbers:</i> <i>Email address:</i>	
<b>Date and times of incident:</b>	

**Details of the incident or concerns:**

**Include other relevant information, such as description of any injuries and whether you are recording this incident as fact, opinion or hearsay.**

**Child's account of the incident:**

**Include as many 'exact words' as possible**

**Please provide any witness accounts of the incident:**

**Please provide details of any witnesses to the incident:**

*Name:*

*Position within the club or relationship to the child:*

*Date of birth (if child):*

*Address:*

*Postcode:*

*Telephone number:*

*Email address:*

**Please provide details of any person involved in this incident or alleged to have caused the incident / injury:**

*Name:*

*Position within the club or relationship to the child:*

*Date of birth (if child):*

*Address:*

*Postcode:*

*Telephone number:*

*Email address:*

Please provide details of action taken to date:

Has the incident been reported to any external agencies?

- Yes  
 No

If YES please provide further details:

*Name of organisation / agency:*

*Contact person:*

*Telephone numbers:*

*Email address:*

*Agreed action or advice given:*

<b>Your Signature:</b>		<b>Print name:</b>	
<b>Date:</b>			

Please send completed form to:

Lead Safeguarding Officer - Colin Constable

Email: [safeguarding@ikc.org.uk](mailto:safeguarding@ikc.org.uk)

Tel: 07590 687477

All information contained on this form will be treated confidentially and in line with data protection. Please complete the form to the best of your ability, try to refrain from expressing personal opinions and views and supply as much detailed information and facts as possible

IKC JUNE 2019