

## Safeguarding Referral Form for People in a Position of Trust

This referral form must be completed and e-mailed to [safeguarding@gbskateartistic.co.uk](mailto:safeguarding@gbskateartistic.co.uk) within 24 hours if it is alleged that a person who works with children or vulnerable adults has:

- Behaved in a way that has harmed or may have harmed a child or vulnerable adult
- Possibly committed a criminal offence against or related to a child or vulnerable adult
- Behaved towards a child/children/vulnerable adult in a way that indicates they may pose a risk of harm to children or vulnerable adult
- Behaved or may have behaved in a way that indicates they may not be suitable to work with children or a vulnerable adult

**If there are immediate safeguarding concerns in relation to a child, you will need to call 999 and then complete this form for the GBSA Safeguarding Team**

**Remember – Safeguarding is everyone’s responsibility**

**Date/Time of incident:**

**Date Referrer notified of incident:**

**Information about Person being referred:**

Name:

Club/Academy:

Position held at Club/Academy:

Date of Birth:

Ethnicity:

Home Address including post code:

Is the referred person aware that you have referred? Yes / No

**Does the person being referred have children of their own?      Yes / No**  
**(If yes, complete details below)**

	Child One	Child Two	Child Three
Name of child:			
Date of birth:			
Home address:			

<p><b><u>Referrers details:</u></b></p> <p>Name:</p> <p>Position held at Club/Academy:</p> <p>Club Name</p> <p>Address:</p> <p>Telephone Number:</p> <p>Referrers Email:</p> <p>Do you consent to your details being shared with the person being referred: YES / NO</p>																											
<p><b><u>Details of the Club/Academy Safeguarding Lead (if different from above)</u></b></p> <p>Name:</p> <p>Contact Number:</p> <p>Email:</p>																											
<p><b><u>Details of the child/children involved in the allegation:</u></b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;"></th> <th style="width: 25%;">Child One</th> <th style="width: 25%;">Child Two</th> <th style="width: 25%;">Child Three</th> </tr> </thead> <tbody> <tr> <td>Name:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Date of birth:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Ethnicity:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Home address:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Have the child's parents/carers been informed?</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>					Child One	Child Two	Child Three	Name:				Date of birth:				Ethnicity:				Home address:				Have the child's parents/carers been informed?			
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Have the child's parents/carers been informed?																											
<p><b><u>Details of the incident and resulting allegation/concern being raised:</u></b></p> <p><i>Any injury to victim, date, time and place of incident if known and views of the child where known</i></p>																											
<p><b><u>What actions have been taken to date, if any?</u></b></p>																											

Have there been previous concerns in relation to person being referred?

**THANK YOU FOR TAKING THE TIME TO COMPLETE AND RETURN THIS FORM.**

**Please do not discuss the information contained in this form with any other person, other than the designated Safeguarding Lead for the Club/Academy (unless that person is involved in the allegation) or the GBSA Safeguarding Team.**

***FOR GBSA USE ONLY***

**Date/Time GB Skate Artistic Safeguarding Team notified of incident:**

**Date of Referral to LADO if applicable (children only):**