



Child Protection Observation / Disclosure Record

Recording suspicions of abuse and disclosure:

Child's Name:.....

Child's Age.....

Child's address:.....

Date of Observation / Disclosure: Day:..... Month:..... Year:.....

Time of Observation / Disclosure: Hour:.....Minute:.....

An objective record of Observation / Disclosure including exact words spoken by child:

Person to whom the concern was reported

Date:.....Time:.....

Any other person present at the time

Signed:.....Date:.....

This report will be signed and dated and kept in a confidential file by the Welfare Officer.

Report actioned as required [Welfare Officer]:

Report closed & filed [Welfare Officer]:.....