



BUXTON PRIMARY SCHOOL CHILD PROTECTION PROCEDURES INCIDENT REPORT FORM

If you are concerned about a child in school, if they show signs of suffering abuse or neglect (see criteria attached to school child protection policy), please complete this incident form and return to Headteacher/Senior Designated Teacher.

Child Name: _____

Class: _____ Year Group _____ Age: _____

Form Completed by: _____

Position in school: _____

Date of incident: _____ Date of form: _____

Nature of Concern:

Received by _____

Date: _____

Action to be taken:

Signed: _____