

# Kilmore Diocese - Safeguarding Children Recording Form

(Adapted from the NBSCCC's Recording Form)

## 1) About the disclosure/concern -

Date of disclosure / concern: .....

Time of disclosure/concern: .....

How was information received? (*attach any written information to this form*)

Telephone : ☐ Letter: ☐ Email: ☐ In person: ☐

## 2) Details of person reporting disclosure / raising concern -

Name: .....

Address: .....

Tel: ..... Mobile: ..... Email: .....

Relationship to child or alleged victim: .....

## 3) Details of the alleged victim -

Name: ..... DOB / Age: .....

Address: .....

Tel: ..... Mobile: .....

Ethnic Origin: .....

Language: (is interpreter/ signer needed) .....

Disability / Special needs: .....

Parish / Order: (*if applicable*) .....

## 4) Parent / Carer details (*where appropriate*) -

Name: .....

Address if different from above: .....

Tel: ..... Mobile: .....

Are they aware of the allegation, suspicion or complaint ? Yes ☐ No ☐

## 5) Details of alleged perpetrator -

Name: ..... DOB / Age: .....

Address: .....

Tel: ..... Mobile: .....

Relationship to child/ victim:( *parent / priest / teacher etc*) .....

Position in Church/ Order: .....

Address at time of incident(s): .....

Current contact with children if known: (*sit on BOM of school, runs youth activities etc*)

Any additional information:

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**6) Brief details of concern, allegation or complaint -**

(dates / times / location / nature of the incident) .....

Witnesses (if any): .....

Does the alleged victim know this referral is being made ?      Yes ☐      No ☐

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**7) Action taken -**

Has the matter been referred to civil authorities ?      Yes ☐      No ☐

If yes, please state:    Date: .....      Time: .....

Who was it referred to:

Name: .....      Designation: .....

Address: .....

Tel: .....      Mobile: .....      Email: .....

If not reported, explain why: .....

Has the matter been referred to a Church member ?      Yes ☐      No ☐

If yes, please state:    Date: .....      Time: .....

Who was it referred to:

Name: .....      Designation: .....

Address: .....

Tel: .....      Mobile: .....      Email: .....

If not reported, explain why: .....

### 8) Next Steps -

What actions were agreed and by whom when the matter was referred onto civil / Church authority?

***Are there any immediate child protection concerns? If so please record what they are and state what actions have been taken by whom to address them:***

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### 9) In the event that this form is not completed by the designated liaison person (DLP) please give the DLP's details -

Name: .....

Address: .....

Tel: ..... Mobile: ..... Email: .....

Date this form is sent to the DLP: .....

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### 10) Details of person completing the form -

Name: .....

Tel: ..... Mobile: ..... Email: .....

Position in Church: .....

Diocese / Parish / Order: .....

Form completed :

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

Signed: .....

*(A copy must be retained by the recipient and filed in a secure location, and a copy must be sent to the diocesan designated liaison person and civil / statutory authorities).*