

Annex III:

Child Safeguarding Report Form

This report should be

- Completed only with facts and corresponding concerns while embellished details are prohibited.
- Completed IMMEDIATELY and in any event no later than 24 hours following any incidents that raise any concern about a child.
- Completed by any member who has reason to be suspicious about or concerned about the wellbeing of a child.
- Marked "Private & Confidential" and be returned to the Child Protection Officer by sealed envelope or by email.
- Signed by all parties involved.

Case No: _____ (to be inserted by IHKSports)

Details of the Informant:

Name: _____

Gender: _____

Contact Number: _____

Email: _____

Occupation/Position in Relation to the Child/IHKSports: _____

Details of the Child Concerned:

Name: _____

Gender: _____

Class/Program: _____

School: _____

Date of Birth: _____

Ethnicity: _____

Language Spoken: _____

Any Known Disability: _____

Name of Parents/Guardians (if known): _____

Other Information:

e.g. Anything or any person that could potentially place the child at further risk? Are the parents/guardians aware of the incident taken place?

Details of the Concern:

Record the details of the concern, and any record of anything said to you by the child and the witnesses. Include dates, times, type of concern, information of the witnesses, physical and emotional state of the child and current safety of the child. Please attach additional sheets, if necessary.

Handling of the Concern:

Individuals/Parties that are aware of the incident:

e.g. Police, social service, departments, authorities, friends, family members

Actions that have been taken to date:

Further Action:

Declaration:

I hereby declare that the above statement is true to the best of my knowledge and belief. I understand that, if it is found that I have withheld information or knowingly included any false or misleading information above, disciplinary procedures will follow.

Date and time of report being made: _____

Signature of Informant: _____

Signature of Child Protection Officer: _____

Follow-up Report

Follow up **one month after** the concern:

E.g. Has the child been discharged from the hospital or if he/she requires further treatment? Has the concern been further reported to different parties or individuals?

Declaration:

I hereby declare that the above statement is true to the best of my knowledge and belief. I understand that, if it is found that I have withheld information or knowingly included any false or misleading information above, disciplinary procedures will follow.

Date and time of the follow-up report being made: _____

Signature of Informant: _____

Signature of Child Protection Officer: _____