



Stirling County RFC  
Bridgehaugh Park  
Causewayhead Road  
Stirling  
FK9 5AP

### **Stirling County RFC - SIGNIFICANT INCIDENT FORM**

This form must be completed as soon as possible after receiving information that causes concern about the welfare or protection of a child. The form must be passed to **Club Child Protection Officer/Scottish Rugby Lead Officer for Child Protection** as soon as possible after completion; do not delay by attempting to obtain information to complete all sections.

- ✓ Complete Part A of this form if the concerns relate to the general welfare of a child.
- ✓ Complete Parts A and B if the concerns relate to possible child abuse.

#### **PART A WHERE THERE ARE CONCERNS ABOUT GENERAL WELFARE OF A CHILD**

##### **1. Child's Details**

<b>Name:</b>	<b>Date of Birth:</b>
<b>Address:</b>	<b>Tel No:</b>
<b>Postcode:</b>	
<b>Preferred Language:</b>	<b>Is an interpreter required? YES / NO</b>
<b>Any Additional Needs?</b>	

##### **2. Details of Person Recording Concerns**

<b>Name:</b>	<b>Position/Role:</b>
<b>Address:</b>	<b>Tel No:</b>
<b>Postcode:</b>	

##### **3. Details of Incident giving rise to Concerns**

(including date, time, location, nature of concern, who, what, where, when, why)

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**4. Details of any witnesses**

(including names, addresses and telephone contacts)

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**5. Details of injuries**

(including all injuries sustained, location of injury and action taken)

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**PART B WHERE THERE ARE CONCERNS ABOUT POSSIBLE CHILD ABUSE**

**6. Details of person about whom there is a concern**

<b>Name:</b>	<b>Relationship to Child:</b>
<b>Address:</b>	<b>Tel No:</b>
<b>Postcode:</b>	

**7. Details of concerns**

(including date, time, location, nature of concern, who, what, where, when, why  
Continue on a separate sheet if necessary)

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**8. Details of any action taken**

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**9. Details of agencies contacted**

(including date, time, name of person contacted and advice received)

**10. Have the child's parents/carers been informed? YES/NO (delete as appropriate)**

If yes, record details / If no please state why not:

**11. Child's views on situation (if expressed). Where possible, please use the child's own words.**

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Position: \_\_\_\_\_