



Child Incident Notification

Date of report:

1. Names(s) of person reporting and contact details					
Name:	Telephone:				
Position:	Email:				
2. Type of Allegation					
Please circle most appropriate description of alleged incident:	Further details if known (Date\location\when report was received):				
Sexual Abuse\Sexual Misconduct	Other relevant details: (For example implements used, vulnerability, or disability factors):				
Physical Abuse					
Psychological Abuse					
Neglect					
Other					
3. Details of Person(s) against whom the allegation has been made					
Family Name:					
Given Name:					
Sex:					
Date of birth:					
Nationality:					
Contact details:					
Employer\School:					
(Please circle most appropriate descriptor. You can circle more than one)	School staff members	Member of school Community	GSP Team Member or Volunteer	Contractor at school	Other
Position: (If applicable)					
Other information:					

4. Details of Victim(s)	
Family Name:	
Given Name:	
Sex:	
Date of birth:	
Nationality:	
Contact details:	
Age of child at time of alleged incident:	
Have any injuries been observed or reported?	
5. Further Details	
Is the victim still in danger of abuse or neglect?	
Are local police or other local authority aware of the incident/allegation?	
What other authorities have been informed?	
Has the AFP at post (where relevant) been advised or consulted? If so, what is their response or proposed action?	
6. Any other pertinent information for initial assessment	