



Banana Island School

Child protection report form

Name of Child _____

Name of Person Who
Received the Disclosure _____

Role in School _____

Date and Time of Report _____

Details of Disclosure (Please use an additional sheet if required – any
information could be relevant so please write it down)

Who have you spoken to about your concern?

Senior Member of Staff Yes/No

Child Protection Officer Yes/No

Name _____

Next steps

Signature _____ Date/Time _____

Child Protection Officer Signature _____