

# REPORT FORM

## for Concerns, Suspicions and Incidents

**> Form for reporting suspected cases of child / vulnerable person abuse or maltreatment for RED NOSES Foundation**

The information contained in this form is confidential. This form is for reporting concerns about potential violations of the RED NOSES CVPS Policy. Please provide as much information as possible in the form. Please take the General Data Protection Regulation (GDPR) into consideration. **Sections denoted with an \* need to be filled out.**

**\*Form for reporting suspected cases of child/vulnerable person abuse or maltreatment**

**Email to: [safeguarding@rednoses.eu](mailto:safeguarding@rednoses.eu)**

(within 24 hrs after receiving information on or becoming aware of the suspected case)

**\*Date:**

**\*Place:**

**Information about the person who is reporting:**

Name:

**\*Organisation person works for:**

**\*Position at RED NOSES or relationship to RED NOSES:**

**\*Relationship to the child, young person or adult:**

Phone:

Mobile:

Email:

**Address:**

### Information about the child, the young person or the adult

Name:		<input type="checkbox"/> *Male <input type="checkbox"/> Female <input type="checkbox"/> other		
Nationality:	Date of birth:	<input type="checkbox"/> *Age:		
*Programme/format (e.g. Intensive Smile, Circus, etc.):				
Type of relationship to the project (e.g. clown artists, RN office staff, journalist, etc.):				
Address of the child, young person or adult and contact details:				
Who is responsible (parental custody) for the child, young person or adult:				
Further information about the child, young person, adult (e.g. in particular whether vulnerable, disabled, traumatised, cultural factors etc.):				

### Information about the suspected person

Name:		<input type="checkbox"/> *Male <input type="checkbox"/> Female <input type="checkbox"/> other		
Nationality:	Date of birth:	Age:		
Address and contact details:				
*Relationship to RED NOSES:				
Relationship to the child, young person, adult:				

**Information about the reported case**

**\*Type of suspicion:**

- Violation of internal safeguarding guidelines
- Sexual abuse (e.g. fondling, kissing, non-contact sexual activity, rape)
- Emotional abuse (e.g. intimidation, threats, humiliation, bullying)
- Physical abuse (e.g. hitting, kicking, shaking)
- Other (provide details):

\*Date:

\*Time:

\*Location:

**\*How did you find out about the suspected case?**

- Witnessed personally      Through colleague(s)      Child/young person/adult told me      Other

**\*Are there witnesses?**      Yes      No

If yes, please insert name, position and contact details:

**\*Please describe the suspected case in detail:**