

Church Safeguarding Notes Template

Church:	Circuit:	Date of occurrence:
Name of person reporting:	Role of person reporting:	Signature:

	Name	Address	Age/DOB	Contact Number
Victim				
Alleged Perpetrator				
Other				

Is the victim: <input type="checkbox"/> A child (aged 0-18 years) <input type="checkbox"/> A vulnerable adult <input type="checkbox"/> A survivor of church related abuse <input type="checkbox"/> A Methodist member <i>(please state role)</i> <input type="checkbox"/> Other <i>(please state)</i>	Is the alleged perpetrator: <input type="checkbox"/> A child (aged 0-18 years) <input type="checkbox"/> A vulnerable adult <input type="checkbox"/> A survivor of church related abuse <input type="checkbox"/> A Methodist member <i>(please state role)</i> <input type="checkbox"/> Other <i>(please state)</i>	Are you aware if the victim has any of the following vulnerabilities? <input type="checkbox"/> A physical disability/illness <input type="checkbox"/> A learning disability <input type="checkbox"/> A mental health illness <input type="checkbox"/> Alcohol/substance misuse <input type="checkbox"/> Risk of exploitation <input type="checkbox"/> Other <i>(please state)</i> Or <input type="checkbox"/> No apparent vulnerability	Are you aware if the perpetrator has any of the following vulnerabilities? <input type="checkbox"/> A physical disability/illness <input type="checkbox"/> A learning disability <input type="checkbox"/> A mental health illness <input type="checkbox"/> Alcohol/substance misuse <input type="checkbox"/> Risk of exploitation <input type="checkbox"/> Other <i>(please state)</i> Or <input type="checkbox"/> No apparent vulnerability
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Nature of Abuse: <input type="checkbox"/> Physical Abuse <input type="checkbox"/> Emotional/Psychological <i>(incl Domestic Abuse and Violence)</i> <input type="checkbox"/> Neglect <input type="checkbox"/> Self-Neglect <input type="checkbox"/> Child Sexual Exploitation <input type="checkbox"/> Child Sexual Abuse <i>(current)</i>	<input type="checkbox"/> Child Sexual Abuse <i>(non-current)</i> <input type="checkbox"/> Financial <input type="checkbox"/> Discriminatory <input type="checkbox"/> Organisational <input type="checkbox"/> Spiritual <input type="checkbox"/> Online <input type="checkbox"/> Other <i>(please state)</i>	Information shared with: <i>please indicate all contacted</i> <input type="checkbox"/> Minister <input type="checkbox"/> Church Safeguarding Officer <input type="checkbox"/> Circuit Safeguarding Officer <input type="checkbox"/> District Safeguarding Officer <input type="checkbox"/> Other <i>(please state)</i>
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