

ASEEDER Safeguarding incident form

1. Your details – the person completing the form

Name:	
Position:	

2. Are you responding to your own concerns or to concerns raised by someone else?

- Responding to my own concerns
- Responding to concerns raised by someone else

If responding to concerns raised by someone else:

Name:	
Position:	
Telephone:	
Email:	

3. Details of the Incident

- Did the Safeguarding concern occur internally (an ASEEDER staff member or contracted member of staff) *complete section 3.*
- Did the Safeguarding concern occur externally (a school/client/other related third parties) *complete section 4.*

If the Safeguarding concern occurred **internally** please provide details of the incident.
Details of the incident (please describe in detail using only the facts)

Reviewed by: 25 August 2025
Next review date: 24 August 2026

ASEEDER Safeguarding incident form

4. Other present or potential witnesses

Name:	
Position:	
Telephone:	
Email:	

To be completed by ASEEDER Office

6. Please provide details of action taken to date:

7. Has the incident been reported to any external agencies?

Yes
 No

If yes, please provide further details:

Name of organisation/agency:	
Contact person:	
Telephone:	
Email:	
Date of contact:	
Agreed action or advice given:	

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Your name:	
Signature:	
Date:	

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