**Church Safeguarding Notes Template**

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

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|  | **Name** | **Address** | **Age/DOB** | **Contact Number** |
| **Victim** |  |  |  |  |
| **Alleged Perpetrator** |  |  |  |  |
| **Other** |  |  |  |  |

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| **Is the victim:**  A child (aged 0-18 years)  A vulnerable adult  A survivor of church related abuse  A Methodist member  *(please state role)*  Other *(please state)* | **Is the alleged perpetrator:**  A child (aged 0-18 years)  A vulnerable adult  A survivor of church related abuse  A Methodist member  *(please state role)*  Other *(please state)* | **Are you aware if the victim has any of the following vulnerabilities?**  A physical disability/illness  A learning disability  A mental health illness  Alcohol/substance misuse  Risk of exploitation  Other *(please state)*  Or  No apparent vulnerability | **Are you aware if the perpetrator has any of the following vulnerabilities?**  A physical disability/illness  A learning disability  A mental health illness  Alcohol/substance misuse  Risk of exploitation  Other *(please state)*  Or  No apparent vulnerability |

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| **Nature of Abuse:**  Physical Abuse  Emotional/Psychological *(incl Domestic Abuse and Violence)*  Neglect  Self-Neglect  Child Sexual Exploitation  Child Sexual Abuse *(current)* | Child Sexual Abuse *(non-current)*  Financial  Discriminatory  Organisational  Spiritual  Online    Other *(please state)* | **Information shared with: *please indicate all contacted***  Minister  Church Safeguarding Officer  Circuit Safeguarding Officer  District Safeguarding Officer  Other *(please state)* |

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| ***When record keeping consider: who, what, where, when, actions taken*** | | |
| **Date and Time** | **Notes relating to issue** | **Author**  **Role**  **Date** |
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