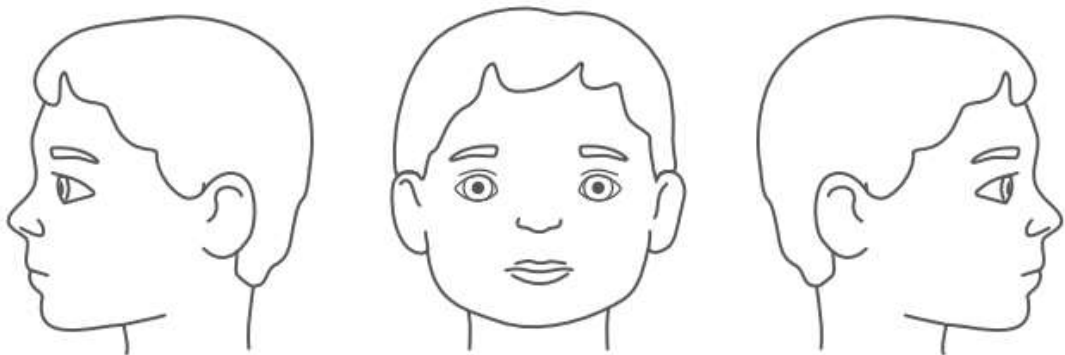
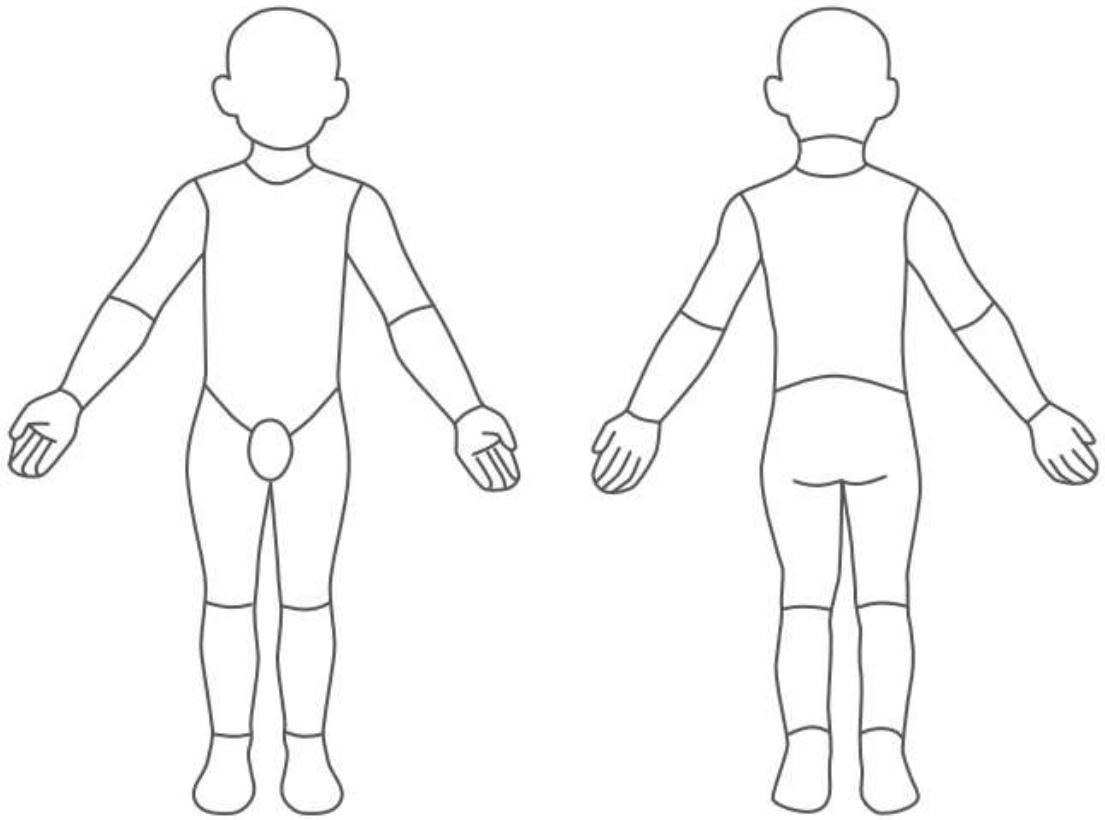




Welfare Referral Form for CSC

Name of child/young person at risk	
Age of child/young person	
Home address/telephone number	
Who is reporting this concern?	
Contact details for this person above	
Nature of allegation/incident	
Description of any visible injury (please also annotate body map overleaf)	
Any witnesses to the incident?	
Child/young person account of incident	
Have the parents of the child/young person been contacted?	
Has anyone else been consulted?	
Sign and date	



Body Map taken from Swim England Wavepower 2020-2023 p26