



## CHILD WELFARE – EXTERNAL BODY INCIDENT REPORT FORM

Your name:
Your position:
Are you reporting your concerns or passing on those of somebody else? (Give details)
Brief description of what has prompted these concerns: include dates, times etc of any specific incidents
What are the names, age, date of birth, parents/carers names and home address of the child/children involved?
Have you spoken to the child/children and/or parent/carer of the child/children involved? If so, what was said?
Has anybody been alleged to be the abuser? If so, give details.

