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| **1. Basic Details** | | | | | | | | |
| **Name:** | | | | **Date of Birth:** | | | | |
| **Telephone Number:** | | | | **Date of Referral:** | | | | |
| **Safeguarding/Welfare** | | | | **Course:** | | | | |
| **2. Disclosure/Concern** | | | | | | | | |
| **Type of Abuse**  Please tick relevant boxes | | | | | | | | |
| **Emotional** |  | **Physical** |  | | **Sexual** |  | **Neglect** |  |
| **Other safeguarding issue:** | | | | | | | | |
| **Details of Concern** | | | | | | | | |
| **Please detail your area of concern. This can relate to your course, your personal life, financial issues or can be about someone else who you have concerns for. For example, What are you worried about? Who are you worried about? Do not worry about providing lots of information as I will follow this up with you once I have received the referral.** | | | | | | | | |
| **Any other relevant information (distinguish between fact and opinion)** | | | | | | | | |
| **. Check to make sure your report is clear to someone else reading it.**  **Please pass this form to your Designated Safeguarding Lead.**  **E-Mail –** [**Safeguardingandprevent@jmet.org.uk**](mailto:Safeguardingandprevent@jmet.org.uk)  **Designated Safeguarding Lead – Caroline Grundy – 07494056451**  **Deputy Safeguarding Lead – Emma Gasher - 079511015054** | | | | | | | | |