STRICTLY CONFIDENTIAL

AOFC | RECORD OF CHILD ABUSE ALLEGATION

Type	Form
Purpose / Audience	Internal / Members / Club Personnel / Club Board / Volunteers
Implemented Date	January 2023
Review Date	January 2025

Before completing, ensure the procedures outlined in Procedure for Handling Allegations of Child Abuse have been followed and advice has been sought from the relevant government agency and/or police.

Complainant's Name (if other than the child)		**Date Complaint Received**		
Role/status in sport				
Child's name		**Age**		
Child's address				
Person's reason for suspecting abuse (e.g., observation, injury, disclosure)				
Name of person complained about				
Role/status in sport	□ Administrator (volunteer) □ Parent □ Athlete/player □ Spectator □ Coach/Assistant Coach □ Support Personnel □ Employee (paid) □ Other □ Official …….			
Witnesses (if more than 3 witnesses, attach details to this form)	Name 1		Contact	
	Name 2		Contact	
	Name 3		Contact	
Interim action (if any) taken (to ensure child's safety and/or to support needs of person complained about)				

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Police contacted	Who: When: Advice provided:
Government agency contacted	Who: When: Advice provided:
President contacted	Who: When:
Police and/or government agency investigation	Finding:
Internal investigation (if any)	Finding:
Action taken	
FOR INTERNAL PURPOSES	
Completed by	Name: Position: Signature: Date: / /
Signed by	*Complainant (if not a child)*

This record and any notes must be kept in a confidential and safe place and provided to the relevant authorities (police and government) should they require them.