Appendix A

Safeguarding Concern / Disclosure Form

Learner Name	
DOB	
Learner Number	
Course	
Company	
Reported by	
Reported to	
Date reported	
Details / Type of Concern / Disclosure / Current external agency involvement (also note is there are any dependents associated with the learner).	
Action Referred / Not Referred To	
Follow Up / Outcome	
Completed by Date	