## Appendix I Confidential Record of Child Abuse Allegation

Before completing this form, please ensure that the steps outlined in Appendix A have been followed and advice has been sought from the relevant child protection agency and/or police.

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| Complainant’s Name:  (if other than the child) |  | Date Formal Complaint Received: |
| Role/status in netball: |  | |
| Child’s name: |  | Age: |
| Child’s address: |  | |
| Person’s reason for suspecting abuse:  (e.g. observation, injury, disclosure) |  | |
| Name of person complained about (Respondent): |  | |
| Is the Respondent a financial member of Netball NSW? | ❑ Yes ❑ No | |
| Role/status in netball: | ❑ 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 details: | |
| Name (2):  Contact details: | |
| Name (3):  Contact details: | |
| Interim action (if any) taken:  (to ensure child’s safety and/or to support needs of the Respondent)) |  | |
| Police contacted: | Who:  When:  Advice provided: | |

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| Child Protection agency contacted. | Who:  When:  Advice provided: |
| CEO or Affiliate President or Secretary contacted. | Who:  When: |
| Police investigation (if any). | Finding: |
| Child Protection agency investigation (if any). | Finding: |
| Internal investigation:  (if any) | Finding: |
| Action taken: |  |
| Completed by: | Name:  Position in Netball NSW/ Affiliate:  Signature: Date: / / |
| Signed by: | Complainant: (if not a child) |

**This record and any notes must be kept in a confidential place and safe place.** If required, the form should be provided to the police and/or relevant child protection agency. Please provide a copy to [policy@netballnsw.com](mailto:policy@netballnsw.com)