



# Wodonga Citizens' Band Inc

## Child Safety Incident Report

### Incident details

<b>Date of incident:</b>	
<b>Time of incident:</b>	
<b>Location of incident:</b>	
<b>Name(s) of child/children involved:</b>	
<b>Name(s) of staff/volunteer involved:</b>	

If you believe a child is at immediate risk of abuse phone 000.

### Please categorise the incident

Physical abuse

Sexual abuse

Emotional abuse

Neglect

Bullying


### Please describe the incident

<b>When did it take place?</b>	
<b>Who was involved?</b>	
<b>What did you see?</b>	
<b>Other information</b>	

### Office use:

<b>Date incident report received:</b>		<b>Has the incident been reported to:?</b>	
<b>Band member managing incident:</b>		• Child protection	
<b>Follow-up date:</b>		• Police	
<b>Incident ref. number:</b>		• Another third party (please specify):	