**GDWG Adult Safeguarding Report Form (2020)**

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| Staff name and position: |  |
| Name & address of vulnerable adult: |  |
| Name & contact number of person alleging abuse: |  |
| Date/time of allegation: |  |
| Where event was witnessed: |  |
| Other people present: |  |
| What happened (record the individual’s own words): |  |
| Any evidence (e.g. bruising/change in behaviour): |  |
| Who has been informed, when and what action, if any, was taken: |  |
| Action taken by member of staff/volunteer: |  |
| Date and signature: |  |