**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:   |     |