

ANNEX

3

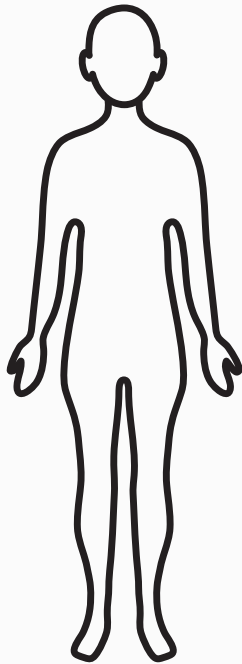
INCIDENT REPORT



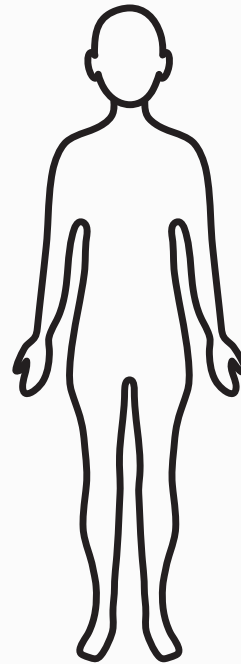
A. REPORTING PARTY:	
Name and surname and ID card number:	
Time and Date:	
Work Address and Telephone number:	
Did person witness the incident?	

B. VICTIM:	
Name, Surname and Age:	
Present location of victim:	
Spoken language:	
What type of abuse? (Physical, mental, emotional, sexual neglect, other)	
Relationship to suspect:	

INCIDENT REPORT



Front



Back

<p>C. Incident information CHILD SAID (narrative description of what victim SAID:</p>	
<p>Date and time of incident:</p>	
<p>Place of incident:</p>	
<p>If multiple victims indicate the number:</p>	

INCIDENT REPORT



<p>ADULT SAID Incident information (narrative description of what the person accompanying the child SAID:</p>	
<p>WITNESS OBSERVED Incident information (narrative description of what the person who witnessed the abuse observed:</p>	
<p>MFWS Safeguarding Focal Point on duty: (indicate if contacted, name, date, time)</p>	
<p>MFWS Supervisor on duty: (indicate if contacted name, date, time)</p>	

INCIDENT REPORT



D. REPORT NOTIFICATION:	
MFWS - Official contacted, Title, Name and Surname: (contacted by phone, email, sent report or face-to-face)	
Name, Time and Date:	
Law Enforcement: Official contacted, Title, Name and Surname (report by phone, email sent report or meeting face-to-face)	
Name, Time and Date:	
Child services: Official contacted, Title, Name and Surname (report by phone, email, sent report or meeting face-to-face)	
Name, Time and Date:	
Other comments:	

INCIDENT REPORT



E: WAY FORWARD	
Case Summary:	
Name of MFWS official following case:	
Case Closed or otherwise: (Kindly indicate by writing yes or no)	
MFWS witness who opened the case:	
MFWS Safeguarding Focal Point	