

## Melton College, York. Low Level Safeguarding Concerns Form

Staff, volunteers and regular visitors are required to complete this form and pass it to Jake Millson, DSL (or if not available/appropriate, Andrew Hjort or Denise Lloyd ADSLs) if they have a safeguarding concern about a student or someone in contact with students at our College. Alternatively, the form can be emailed to [safeguarding@meltoncollege.co.uk](mailto:safeguarding@meltoncollege.co.uk).

| Information Required   | Enter Information Here |
|--|------------------------|
| Full name of student/staff   |                        |
| Date of birth (if known)   |                        |
| Your name and position in the school   |                        |
| Nature of your concern. What did you hear/see?<br><br><i>(Make sure you distinguish between what you witnessed and your opinion of what you witnessed)</i> |                        |
| Name of the person or persons about whom you are concerned (if relevant)   |                        |
| Signed   |                        |
| Date   |                        |
| Time form received by DSL  |                        |
| Action Taken by DSL  |                        |
| Signature of DSL   |                        |
| Date   |                        |