



## REPORTING CONCERNS DECISION FORM

This form must be completed as soon as a decision has been reached to share data to ensure accurate recording of the following details:

(i) What information was shared and for what purpose?

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(ii) Who it was shared with?

Name: \_\_\_\_\_

Role: \_\_\_\_\_

(iii) When it was shared?

Phone call

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Email with Concern Recording Form

Date: \_\_\_\_\_ Time: \_\_\_\_\_

(iv) What was the justification for sharing?

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(v) Was information shared with or without consent?

Young Person [U18 Player] Yes / No\*

Adult Yes / No\*

\*(delete as appropriate)