



GUIDANCE NOTES NO:

**2.2**

# **SAFEGUARDING REFERRAL FORM – AFFILIATED FOOTBALL**

**FOR ALL**

Version: 1.2  
Published: DECEMBER 2020



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# AFFILIATED FOOTBALL REFERRAL FORM

Date of Referral: \_\_\_\_\_ County FA(s): \_\_\_\_\_

## PARTICIPANT'S DETAILS (THIS IS THE PERSON YOU ARE REFERRING TO THE FA)

Participant name:		Relationship to victim/s:	
Address:		Tel number:	
		Email:	
		Role in football: (is the post paid?)	
		Club or organisation:	
Postcode:			
Date of Birth:		FAN (FA Number):	
Gender:		Ethnicity:	

## REFERRER'S DETAILS (PLEASE ENTER YOUR DETAILS)

Name of referrer:		FAN (FA Number):	
Address:		Role/Organisation:	
		Tel number:	
		Email:	
		Relationship to participant:	
Postcode:			

### DETAILS OF CHILD/CHILDREN OR ADULT(S) AT RISK

<b>Details of alleged victim/s (age):</b> e.g. Joe Bloggs (12 years), Wembley FC under-13 girls' team  (Please include name, age, club, parents/carers' details and any other relevant info)		FAN (FA Number):	
		Gender:	
		Ethnicity:	
		Parent/carer name:	
		Contact details: (telephone number, email, etc. )	
		County FA:	

### PROFESSIONAL NETWORK (PLEASE PROVIDE NAME, CONTACT NUMBER AND EMAIL. KINDLY PROVIDE THE ADVICE RECEIVED AND CONTACT DATE WITH AGENCY)

LADO: (Name, telephone number and email address)	
Social Services:	
Police:	
Other : (e.g. NSPCC, Club Designated Safeguarding Officer, etc.)	

## DETAILS OF CONCERNS

<b>Type of abuse:</b> (please tick as appropriate)	<input type="checkbox"/> Sexual abuse <input type="checkbox"/> Emotional abuse <input type="checkbox"/> Physical abuse <input type="checkbox"/> Neglect <input type="checkbox"/> Bullying <input type="checkbox"/> Other (Please specify):
<b>Incident/s details:</b> Please summarise the incident, including details of any other relevant parties.  Clearly identify a list of your safeguarding concern/s	
<b>Do you think this referral relates to:</b> (please tick as appropriate)	<input type="checkbox"/> High-level poor practice <input type="checkbox"/> Possible or actual risk of harm to children <input type="checkbox"/> For information only <input type="checkbox"/> Not sure
<b>Action taken:</b> Please specify if you referred to a statutory agency, the County FA, the Club Designated Safeguarding Officer or any other action taken related to your concerns (including action taken by the Club).	

## OTHER RELEVANT INFORMATION

### Further information:

Please include any information that you think is relevant to our investigation.

Please include any past concerns the club, league or County FA may have had.

Can The FA contact the victim or their parents/carers directly?



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