

## **WWEC Safe Ministry Report**

This form is to be completed by the person\* who wishes to raise an allegation of inappropriate behaviour. Copies of the completed form should be given only to a **WWEC Safe Ministry Contact (SMC)**.

\*where the person is unable to complete the report it can be completed by the SMC and sent to the person to verify. Alternatively the person may appoint a representative to report the allegation.

## What, When and Where Alleged Inappropriate Behaviour Date\* \_\_\_\_\_ Time\* \_\_\_\_ Event Name\* Ministry Leader at event\* (name/title) Day of the week\* \_\_\_\_\_ Time of Day\*\_\_\_\_\_ \*alleged inappropriate behaviour may not be limited to one event/date Nature of alleged inappropriate behaviour physical $\square$ emotional neglect sexual spiritual harassment bullying other Person of concern (the person an allegation is made against) Full Name\_\_\_\_\_ Address Phone Number (m) In what capacity were they at the event Employee Volunteer Organiser **Group Participant** Other \_\_\_\_ **WWEC Member** Yes No **Affected Person** Full Name\_\_\_\_\_ Address \_\_\_\_\_ Phone Number (m)\_\_\_\_\_\_ Approximate Age In what capacity were they at the event Employee Volunteer Organiser **Group Participant** WWEC Member Yes No

## Describe the allegation of inappropriate behaviour

Please include as much detail as possible

(e.g. who else is involved, what happened before/after, where were you when it happened, were there things that weren't seen, has something similar happened before/since, has anything else happened in relation to the incident/concern since then?).
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Reported by (name)
Reported to SMC (Name)
Person completing report
Date report completed

This report will be kept private and confidential, only made known to those in relevant WWEC leadership and to individuals and organisations who are legally required to know these details.