

Transfer form for Safeguarding Records



(Please print all information)

Full Name of Child:

Date of Birth:

Home address & Post Code

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Name of originating setting:

Address of originating setting:

Name of Designated Safeguarding Lead.....

Date file sent:

Method of transfer: Hand delivered/ Posted by special delivery

Name of receiving setting/school:

Address of receiving setting/school:

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Name of receiving Designated Safeguarding Lead:

Date file received:

Copy of record of file contents received Yes/No

Discrepancies (if any):

Signature of receiving Designated Safeguarding Lead:

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Upon receipt, the receiving setting/school should sign this form and make a copy to keep with the child's safeguarding records. Then **return the original completed form to the originating setting without delay**. The originating setting should keep the returned form securely, alongside the copy of file contents list (follow up any discrepancies with receiving Designated Safeguarding Lead).