

Acknowledgement of reading the Safeguarding Policy form



Date _____

This form is to be signed by Trustees, staff, SL, SD, children and youth workers, counsellors and people who work with adults who require care and support. By signing this, you confirm that you have read the Safeguarding Policy.

Name _____ Role _____ Signature _____

Name _____ Role _____ Signature _____

Name _____ Role _____ Signature _____

Name _____ Role _____ Signature _____

Name _____ Role _____ Signature _____

Name _____ Role _____ Signature _____

Name _____ Role _____ Signature _____

Name _____ Role _____ Signature _____

Name _____ Role _____ Signature _____

Name _____ Role _____ Signature _____

Name _____ Role _____ Signature _____