# Front Sheet: Child Protection Record

Date file started:

| Information Field | Initial Result | Changed to | Changed to |
| --- | --- | --- | --- |
| **Social care status:** (CP, CIN, FSP, EHAP, Cause for Concern) |  |  |  |
| **Name of child:** |  |  |  |
| **Any other names by which the child is known/has been known:** |  |  |  |
| **Date of birth:** |  | Please leave blank | Please leave blank |
| **Address:**(including postcode) |  |  |  |
| **Other family members:**(include full name, relationship, if under 18 include age and school where known) |  |  |  |
| **Name and contact number of key workers:**(Include Children’s Services Social Care and any other relevant professionals) |  |  |  |
| **Name and contact number of GP if known:** |  |  |  |
| **Are any other child protection files held in school relating to another child closely connected to this child?** [Yes/No and details] |  | Please leave blank | Please leave blank |

***[Enter name] school is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.***