

GROUP SAFEGUARDING OFFICER

ROLE ACCEPTANCE FORM

Name:

Address:
.....
.....

Contact telephone number:

Email:

I have attended a minimum of a half day Safeguarding Course and have read the Group Safeguarding Policy Statement (Adult/Child) and the RDA Disclosure Policy Statement.

Signed:
.....

Date:.....

The Trustees of the Group are all in agreement that the above person is to take on the role of Group Safeguarding Officer.

Signed:
.....

Name: (Please print): on behalf of the Trustees of the above Group.

Date:.....