

Online Safety Incident Reporting Form



VALLEY INVICTA
PRIMARY SCHOOL AT
LEYBOURNE CHASE

Date/time of Incident:	
Child and/or Workstation/Device name:	
Incident or concern raised:	
What actions were taken, by whom and why?	
Other information:	
Has any computer or hardware been secured? If so, how/where?	
Has the information been recorded and secured? If so, how/where?	
Member of staff reporting concern:	Signed:
Online Safety Coordinator/Designated Safeguarding Lead:	Signed:
Action taken by Online Safety Coordinator/Designated Safeguarding Lead:	