

RECORD OF UNACCEPTABLE BEHAVIOUR

NAME OF YOUNG PERSON: _____

YOUTH GROUP _____

DATE INCIDENT OCCURRED _____ Time _____ am/pm

WHERE INCIDENT HAPPENED _____

NAME OF YOUTH LEADER _____

NAME OF WITNESS _____

Details of incident: INCLUDING DETAILS OF YOUNG PEOPLE INVOLVED
(continue overleaf if necessary)

DETAILS OF YOUTH GROUP RULES BROKEN (ie abusive, aggressive, dangerous, disruptive, respect (for each other, for premises etc), bad language, challenging authority)

ACTION TAKEN (tick appropriate box)

- 1st verbal warning issued _____ (date)
- 2nd verbal warning issued _____ (date)
- Written warning issued _____ (date)
- Exclusion from _____ (date) to _____ (date)

Form sent to parents:

Date _____

SIGNED DATE _____

NAME OF YOUTH LEADER COMPLETING THE FORM (if different) _____

NOTE TO PARENTS - IF YOU WISH TO DISCUSS THIS FURTHER, PLEASE CONTACT THE YOUTH GROUP LEADER