# Transfer form for child protection records between educational establishments

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| Name of child |  |
| Date of birth |  |
| Unique reference number (schools only) |  |
| Home address |  |
| Name of originating establishment |  |
| Address of originating establishment |  |
| Name of current child protection lead |  |
| Date file exchanged by hand |  |
| Or date file posted by special delivery |  |
| Or date information shared electronically |  |
| Name of receiving establishment |  |
| Address of receiving establishment |  |
| Name of receiving child protection lead |  |
| Date file received by hand |  |
| Or date file received by special delivery |  |
| Or date information received shared electronically |  |
| Signature of receiving child protection lead |  |
| Date signed |  |

**Upon receipt, the receiving setting should:**

* Sign this form and keep a copy with the child’s CP records
* Ensure the original form is returned to the originating establishment without delay

**The originating establishment should keep the returned form securely.**