**SG2: Safeguarding Annual Audit Form**

**Autumn Term 2019**

*The information provided should reflect your Local Authority 175/157 section check. Please return the Schools LA Section check and KCSIE 2019 signature list to* [*safeguarding@plymouthcast.org.uk*](mailto:safeguarding@plymouthcast.org.uk)

***DEADLINE FOR SUBMISSION: Wednesday 6th November 2019***

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| --- | --- | --- |
| **School:** | **Date:** | **Completed by:** |
| Have you completed your Local Authority Audit Safeguarding Section Check in the last 12 months?  ***(please attach)*** | Yes | No |
| Which Local Authority did you complete your section check with? |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **What actions need to take place after completing the 157/175 section check?** | | | |
| ***Identified safeguarding issue and area*** | ***Action*** | ***Person responsible*** | ***Completion date*** |
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Thank you for completing the document.