



## Reporting form for safeguarding allegations and concerns

Model Alliance was founded to advance fair treatment, equal opportunity, and more sustainable practices in the fashion industry, from the runway to the factory floor. Model Alliance is committed to protecting every person who is supported by or works with our organization. This includes all recipients of our services, Board of Directors, Advisory Board, Worker Council, staff, consultants, contractors, interns, volunteers, and other personnel (collectively referred to as “Model Alliance Personnel”).

This form should be used to report any safeguarding incident or concern relating to Model Alliance’s work.

We understand that talking and writing about incidents can be a difficult and emotional process. We appreciate the time and energy you invest into this report.

This form will not be shared outside Model Alliance’s Safeguarding Lead and Board of Directors. We will always ask for consent before acting unless your report describes a situation in which you or others are at risk of harm. In such circumstances, we may be obligated to notify others, including relevant authorities. We will always inform you of actions taken following a risk assessment.

We understand that you may wish to submit this report anonymously. However, in some cases, anonymised reports can limit our ability to investigate further. If you wish to disclose your name on a confidential basis, we will make every effort to maintain this confidence. Please return this form to [safeguarding@modelalliance.org](mailto:safeguarding@modelalliance.org).

### 1. Reporters’ details

Date and time.	
Your name. *	
Your location.	
Your contact details. Email and phone number.	

\* If you would prefer to stay anonymous, you can leave this box empty.

### 2. Who is the concern about?

Is the allegation/concern internal, relating to individuals associated with Model Alliance?	
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Is the allegation/concern external, relating to individuals outside the Model Alliance?	
Is the concern about a child?	
Is the concern about an adult?	

**3. Category of alleged abuse**

Sexual Exploitation	
Bullying/ Harassment	
Physical/Emotional/Psychological Neglect.	
Other (please specify)	

**4. Details of allegations/concerns**

Name of individual(s) involved. (If known)	
Date / time of incident.	
Location of incident.	
Brief summary of incident.	
Details of the incident. (Please include facts, not opinions)	
Were / are there any witnesses? * If yes, and where the witness is happy to be contacted by Model Alliance, please give their	

contact details.	
Are there any other factors you would like us to consider?	

\*We ask this question because witness testimony can help further an investigation. However it is not required.

**5. Immediate action**

Is there a concern that specific individuals still are, or could be, at risk of harm?	
Please provide details of action taken to date.	
Has the incident been reported to any external agency? If so, please provide the name of the agency, contact person, email, phone number.	

**6. Preferred next steps.**

What would you like to happen next in relation to this report?	
How would you like the Designated Safeguarding Lead to contact you about this report?  Please give your email and telephone number.	

If you wish to communicate with the Safeguarding Lead in confidence, please contact Sydney Giordano at [sydney@modelalliance.org](mailto:sydney@modelalliance.org).

Thank you very much for the time you have taken to complete this report.

**Office use only**

<b>Date</b>	
<b>Action Taken</b>	

