

Concern or Incident Report Form

Little Dippers Learning Center – Skagway Child Care Council

All information submitted will be kept confidential and shared only with relevant parties as necessary to investigate and resolve the concern.

Completed forms may be submitted either:

- To the Little Dippers Administrator at littledipperak@gmail.com, or
- To the Skagway Child Care Council Board of Directors at skagwaychildcarecouncil@gmail.com

Date of Submission: _____

Name of Person Reporting (optional if anonymity is requested): _____

Role (check one):

Parent/Guardian
 Employee
 Board Member
 Other: _____

Preferred Contact Method (if follow-up is needed):

Phone: _____
 Email: _____
 No contact requested

1. Nature of Concern or Incident (*check all that apply*)

Staff Conduct
 Child Behavior or Safety Concern
 Workplace Conflict
 Facility or Operational Issue
 Violation of Policy or Procedure
 Parent/Family Concern
 Discrimination or Harassment
 Other: _____

2. Description of Incident or Concern

Please provide as much detail as possible: who, what, when, where. Attach additional pages if needed.

3. Have you addressed this concern with anyone yet?

Yes — Who? _____

No

If yes, what was the result?

4. Desired Outcome/ Action Requested/Resolution

Mediation

Investigation

Training

Disciplinary Action

Other: _____

Expand in what would you like to see happen as a result of this report?

5: Confidentiality Agreement

This Confidentiality Agreement ("Agreement") is made to ensure the privacy and integrity of the information shared as part of a concern or incident report.

Purpose

The purpose of this agreement is to acknowledge the sensitive nature of the information disclosed and to establish expectations around confidentiality for all parties involved.

Confidential Handling

The Little Dippers Learning Center (Skagway Childcare Council) will handle this matter with the highest level of confidentiality possible. Information shared in this report may be disclosed only on a need-to-know basis to:

- Investigate the incident appropriately,

- Comply with legal or regulatory obligations,
- Protect the safety and rights of employees and the organization.

Acknowledgment:

By signing below, I acknowledge that:

- I am submitting this complaint/report in good faith and to the best of my knowledge.
- I understand the information I provide will be used to investigate the concern.
- I agree to maintain the confidentiality of this process to avoid retaliation, speculation, or disruption.
- I understand retaliation for filing a complaint or participating in an investigation is strictly prohibited and should be reported immediately.

No Guarantee of Complete Anonymity

While every effort will be made to protect the identity of individuals involved, complete anonymity cannot be guaranteed during an investigation, especially if specific facts or context make identification unavoidable.

Signature: _____

Printed Name: _____

Date: _____

For Administrative Use Only – DO NOT WRITE BELOW THIS LINE

Date Received: _____

Received by: _____

Follow-up Action Taken:

Resolved
 Further Action Needed
 Referred to the Skagway Childcare Council Board
 Confidential Documentation Filed