



## Multi-Agency Information Submission Form

THIS FORM IS FOR THE SHARING OF NON-URGENT INFORMATION BY PARTNER AGENCIES THAT RELATES TO THE **EXPLOITATION OF CHILDREN**, FOR THE PURPOSES OF IDENTIFYING AND MITIGATING RISK.

**THIS FORM IS NOT A SUBSTITUTE FOR A SAFEGUARDING REFERRAL AND SHOULD NOT BE USED AS SUCH. DO NOT USE THIS FORM TO REPORT A SAFEGUARDING CONCERN OR A CRIME.**

PLEASE REPORT ALL CRIME TO THE POLICE VIA 101

PLEASE REFER SAFEGUARDING CONCERNS TO THE CSCP SAFEGUARDING HUB USING THE SINGLE CONTACT FORM:

- **Cumberland:** [Cumberland Safeguarding Hub Single Contact Form \(cumbria.gov.uk\)](http://cumbria.gov.uk)
- **Westmorland and Furness:** [Westmorland and Furness Safeguarding Hub Single Contact Form \(cumbria.gov.uk\)](http://cumbria.gov.uk)

### Sender Certificate:

I confirm that I have considered the information below and no immediate safeguarding action is required.

<b>Name</b>	Click or tap here to enter text.
<b>Job Title</b>	Click or tap here to enter text.
<b>Organisation</b>	Click or tap here to enter text.
<b>Telephone and Email Address</b>	Click or tap here to enter text.

### Information Arena: Please Tick all that apply

Drugs

**OFFICIAL SENSITIVE when complete**

County Lines

Criminal Exploitation

Child Sexual Exploitation

Missing

Location of Concern

Other

**Who or where is the information coming from? If this is from your own observations please enter 'as above'.**

<b>Full Name and DoB</b>	Click or tap here to enter text.
<b>Address</b>	Click or tap here to enter text.
<b>Contact Number</b>	Click or tap here to enter text.

**If the information is from a 3<sup>rd</sup> party, would they be willing to speak with the Police?**

Yes

No

**Risk to Source:** The protection of the source (the person providing the intelligence) is a priority to the Police. *Please make it clear if you feel there is a risk to the source of this information if it is shared, clearly marking it as **SENSITIVE** so it can be managed accordingly.*

**Information:** Please provide the information that you wish to share in relation to the subject or the location. Include any names/nicknames/DOB/addresses/identifying factors/phone details/actions/ significant events/dates/vehicle details/email details/social media account details (if available)

**OFFICIAL SENSITIVE when complete**

Click or tap here to enter text.

**Send completed form to:**

[registeredprovision&policemou@cumbria.police.uk](mailto:registeredprovision&policemou@cumbria.police.uk)

**with the subject title**

[CSCP Multi Agency Information Submission Form](#)

**Cumbria Police will treat all information received in accordance with Data Protection and Management of Police Information (MOPI) legislation. The details of any source will be secure and unavailable to police officers and staff except for limited, dedicated roles.**

**There must be a policing purpose for information to be recorded. Not all information recorded will have a specific outcome generated and may be retained only to assist future research and investigation purposes. We reserve the right to share this information with other police or law enforcement agencies, or 3rd parties subject to the rules governing such sharing within Data Protection legislation and MOPI.**