**FII Chronology**

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| --- | --- | --- | --- |
| **Name of child:** |  | **Date of Birth (dd/mm/yy)** |  |
| **Complied by:** |  | **Agency:** |  |

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| --- | --- | --- | --- | --- | --- |
| **DATE** | **TIME** | **NAME** | **SOURCE** | **EPISODE / EVENT** | **COMMENT / DISCREPENCY** |
| *dd/mm/yy* | *24 Hr Clock e.g. 14:35* | *Name of the child (there may be more than one child affected)* | *Agency and source within that agency* | *Describe the event/episode (see above section good chronology)* | *With particular reference to any warning signs in Table 1* |
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