

POLICY SUSPECTED CHILD ABUSE/NEGLECT REPORT FORM

Any employee of SAD #46 who suspects that a child has been or is likely to be abused or neglected (the “notifying person”) is required to immediately notify the building administrator (and may also directly report to DHHS, and the District Attorney if required). The purpose of this form is to document your reporting and to facilitate confirmation to you that the building principal or other designated school official has made your report to the Department of Health and Human Services (DHHS) or, as appropriate to the District Attorney. Please see Policy JLF for important definitions and requirements.

This form should be completed by the person making the report to DHHS (and the District Attorney if required) -- generally the Superintendent or building administrator – in consultation with the notifying employee.

The completed form shall be provided to the notifying employee within 24 hours of his/her initial notification of the building administrator of Superintendent. The notifying employee shall sign the form acknowledging that he/she received confirmation that a report was made to DHHS, and the District Attorney if required. The report shall be forwarded to the Superintendent.

The completed form shall be forwarded to DHHS, and the District Attorney if required (see Policy JLF), and filed for the required retention period.

If the notifying employee does not receive a copy of this form confirming that a report was made within 24 hours of his/her original notification to the building administrator/Superintendent, he/she shall immediately make the abuse/neglect report to DHHS, and the District Attorney if required. The employee shall also ensure that this form is completed and filed with the Superintendent.

Suspected Child Abuse and Neglect Form

Code: JLF –E

Section 1 Initial Notification and Student Information

	Name	Contact Information	Date and Time and method of contact
Notifying Employee		RVCS	In person, email phone call on at
Building Administrator / designee Notification		RVCS	In person, email phone call on at

Did the Notifying employee make a report to DHHS ____Yes ____No
 Or the District Attorney's Office ____Yes ____No If Yes please provide

Date	Time	Agency Name	Name of Person spoken to
		DHHS District Attorney Other	

Information about the Student

Student Name	Grade and Homeroom	School	Age and Gender of student
		RVCS DRHS TCTC Other	Age Male Female
Parent's name	Street Address	Town	Telephone number
Names of siblings	Grade and Homeroom	School	Age and Gender
		RVCS DRHS TCTC	Age M F
		RVCS DRHS	Age M F

		TCTC	
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Has there been past evidence or concern for the student or siblings? Yes No

If yes, please explain,

Description of alleged abuse or neglect, include injuries or other indications, explanations provided, who was the alleged perpetrator of abuse or neglect

Was any action taken by school staff besides filing or report ____Yes ____No

If yes, please explain

List any evidence collected ____photographs ____clothing ____
other_____

Any other relevant information not included above:

Section 2 Reports to Superintendent, DHHS and or District Attorney

Name of Reporter _____

Date and time of reports made to Building Principal	Date and time of reports made to Superintendent	Date and time of reports made to DHHS	Date and time of reports made to District Attorney
Name Jerry Kiesman By phone email In person other On At .	Name By phone email In person written document On At	Name By phone email In person other On At	Name By phone other On At N>A
Copy of report given on	Copy of report given on	Copy mailed or faxed on request on	Copy mailed or faxed on request on

Section 3

Confirmation to Notifying employee that report was made to DHHS or DA

On_____at_____. I notified_____

that a report was made to DHHS/DA's office as required. The notification was made by email or in person.

I, _____ acknowledge that I have received the confirmation that the required report has been made to DHHS and the District Attorney (if required)

_____ Date

_____ signature of notifying employee

or

_____ attach copy of email electronic confirmation of notification.