

EMPLOYEE REPORT OF SUSPECTED CHILD ABUSE-NEGLECT

Name: _____ Position: _____

School: _____ Relationship to Child: _____

Child's Name: _____

Have you notified law enforcement officials? _____

Have you notified the Division of Family Service? _____

Describe the circumstances or events that led you to reasonably suspect that an abusive or neglectful situation existed.

List any substantiating witnesses or circumstances that might support your suspicion.

Use other side if additional space is needed.

(This form is to be submitted to the building administrator within 24 hours of the initial oral report of a case of suspected child abuse or neglect.)