

**POLICY TITLE:** Investigating and Reporting Suspected  
Child Abuse, Abandonment or Neglect

**POLICY NO:** 406  
**FORM NO:** 406F1

## Child ABUSE, ABANDONMENT OR NEGLECT REPORT

To Be Completed by Reporting Party

DATE \_\_\_\_\_

STUDENT NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ GRADE \_\_\_\_\_

HOME PHONE \_\_\_\_\_

MOTHER \_\_\_\_\_ WORK PHONE \_\_\_\_\_

FATHER \_\_\_\_\_ WORK PHONE \_\_\_\_\_

DATE OF ABUSE, ABANDONMENT, OR NEGLECT \_\_\_\_\_

DESCRIPTION \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

AGENCY CONTACTED \_\_\_\_\_

NAME OF PERSON CONTACTED \_\_\_\_\_

TIME OF REPORTING TO AGENCY \_\_\_\_\_

NAME OF PERSON REPORTING \_\_\_\_\_

POSITION AND SCHOOL \_\_\_\_\_

\_\_\_\_\_  
Signature