



**Reporting of Suspected  
Child Abuse**

Any school employee who has reasonable cause or reasonable suspicion to believe that any child/adult with whom they have come into contact has suffered abuse or neglect, as defined in state law. If a district employee is a suspected abuser, reporting requirements remain the same.

1. The employee will notify their program Administrator or Superintendent.
2. The Administrator will document the information below.
3. This form and any other accompanying documents will be filed in Human Resources.

**Student Information**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

Parent / Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Staff Information**

Staff Person Making Report: \_\_\_\_\_ Title: \_\_\_\_\_

State basis for concern and indicate if there is any evidence of prior abuse. (Describe reasons, conditions, explanation of abuse, etc.) Please be specific.

---



---



---

**Agency Information**

Name of agency contacted: \_\_\_\_\_

Agency staff member name: \_\_\_\_\_

Date contacted: \_\_\_\_\_ Time: \_\_\_\_\_ AM/PM

Describe agency response if known:

---



---



---

**Signatures**

Receiving Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

**All reports must be filed in the Human Resources Office upon completion of report**