

SUSPECTED ABUSE REPORT FORM

Date \_\_\_\_\_

Name of Student \_\_\_\_\_

Age of Student \_\_\_\_\_ Grade \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_

Postal Code \_\_\_\_\_ Phone # \_\_\_\_\_

Parents' Names \_\_\_\_\_

Siblings' Names \_\_\_\_\_

Name of Person Filing Report \_\_\_\_\_

Name of Leader Receiving Report \_\_\_\_\_

Name of Social Worker \_\_\_\_\_ Phone #, Extension \_\_\_\_\_

.....  
Nature of suspected abuse (physical, sexual, emotional, neglect) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Indications of suspected abuse (including facts, physical signs and course of events) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Action taken (including date and time) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

.....  
Signed \_\_\_\_\_ Signed \_\_\_\_\_  
(Person Reporting) (Elder)  
.....

The above information will serve as a guide and will be necessary if a formal report is filed with the police or appropriate government agency. All information received is to be kept **STRICTLY CONFIDENTIAL.**