### *CHERRYFIELD SCHOOL DEPARTMENT*

***NEPN/NSBA CODE: JLF-E***

**SUSPECTED CHILD ABUSE/CHILD PROTECTION REPORT FORM**

1) Name/title/telephone number of person making report:

2) Date and time of first report:

3) Name/title of school department official first report made to:

4) Did the person making first report contact DHS independently? Yes No

5) Date/time/person making report to Superintendent:

6) Name of student who is subject of report:

Birthdate: Sex: Grade:

Known history of abuse/neglect?

Parent/Guardian Name(s):

Address:

Home and work telephone numbers:

Name(s) of sibling(s):

7) Statements or indicators leading to the suspicion of abuse/neglect (include all known information, including date, time and location, name of alleged abuser, and relationship to student):

8) List any photographs taken or other materials collected related to the report:

Page 1 of 2

### *CHERRYFIELD SCHOOL DEPARTMENT*

***NEPN/NSBA CODE: JLF-E***

9) Actions taken by school officials (list date, time and personnel involved):

10) Reports to authorities:

Agencies contacted by telephone:

Name and title of agency contact:

Date and time of telephone report:

Copy of report form sent (include date and addressee):

Signature of person completing form:

Title of person completing form:

Date:

DATE ADOPTED: August 11, 2015

Page 2 of 2