

JLF-E - Child Abuse Form

(Confidential)

A written follow-up on any phone reports to DHS must be made to DHHS and the Superintendent of Schools within 48 hours of the initial report to DHHS.

Child's Name: _____ Phone: _____

Address _____ DOB: _____

_____ Sex: _____

Mother's Name: _____ Father's Name: _____

With Whom Does Child Reside: _____

Family Composition: _____

Description of Complaint: _____

Other pertinent information (history, previous reports, or concerns, etc.)

Source of Report to Principal: _____ Phone: _____

Occupation/Relationship to Child: _____

Actions Taken By: Principal - Designee: (Please Circle) (Name):

DHS - Name of Contact: _____ Date: _____

Superintendent - Name of Contact: _____ Date:

Signature of Principal or Designee _____

Original: Principal

Blue: Superintendent (Sealed and Marked "Confidential")

Pink: Department of Human Services

Revision #1

Created 7 April 2022 15:37:28 by Matt Frey-Davis

Updated 25 May 2023 15:29:56 by Matt Frey-Davis