

Grants Pass School District 7

Code: **JHFE-AR(3)**
Adopted: 8/10/10

Child Abuse Report Form

ORS 418.750 requires that “any public or private official having reasonable cause to believe that any child with whom the official comes in contact in any official capacity has suffered abuse, or that any person with whom the official comes in contact in any official capacity has abused a child shall report or cause a report to be made...”

Record of Report

Agency to which the report is made: _____

Agency Contact Person: _____ Date of Report: _____

Employee making the report: _____

Information Gathered on Abuse Victim

Information gathered should be as detailed and factual as possible without soliciting further information. Include what was said regarding where, when, people involved, people reporting and relationship to victim. Note type of abuse (physical, sexual, emotional neglect) and indicators (use reverse side if necessary).

Name of child: _____

Parent or Guardian: _____

Address: _____

Phone Number: _____

Child's Birth date: _____ Age: _____

Date and time of alleged abuse: _____

Nature and extent of alleged abuse:

Identity of alleged perpetrator: (if known) _____

Signature of person completing this report: _____ Date: _____