



CHILD ABUSE AND NEGLECT REPORT

CPS Phone number: 866.363.4276

Complete Report Prior to calling CPS.

Site/HV#: _____		Date of Report: _____	
Child Name: _____		Date of Birth: _____	Race: _____
Name of Parent(s): _____			
Physical Address: _____			
Phone Number(s): _____			
Others in Household:		Name/Relationship to Child:	
Check type(s) of abuse reported: <input type="checkbox"/> Physical Abuse <input type="checkbox"/> Sexual Abuse <input type="checkbox"/> Emotional Abuse <input type="checkbox"/> Neglect <input type="checkbox"/> Other: (specify)			
Description of Concern:			
Description of indicators of abuse or neglect (physical, behavioral, etc.):			
Other information (evidence of previous abuse/neglect, identity of perpetrators, time elapsed, etc.)			
Staff Member Making Report:			Date:
Additional agencies reported to: <input type="checkbox"/> Law Enforcement		Name of Person Receiving Report:	
Priority of Report: <input type="checkbox"/> Information Only <input type="checkbox"/> 24 Hours <input type="checkbox"/> 72 Hours <i>(ask CPS worker for status priority)</i>			
Was Parent/Family Notified prior to making this phone call? <input type="checkbox"/> Yes <input type="checkbox"/> No		Type of Contact to Parent/Family: <input type="checkbox"/> Phone <input type="checkbox"/> In Person	

- After completing reporting requirements, this document must be given to the direct Supervisor who will review it and then place in Records folder in the manager's office. **A copy is NOT to be kept on site.**
- Follow up must be reported to direct Supervisor who will inform the appropriate Program Manager.