

Child Protection Policy

Reporting Form

Reporting allegations or suspicions of abuse

If you have any concerns about a child being abused you should inform the Designated Person detailed below.

Organization:

Name

[_____]

Job/Role

[_____]

Address

[_____]

Tel no

[_____]

Important contacts outside the organization

Social Services office: _____

Address: _____

Tel no: _____

Emergency no: _____

Police station: _____

Address: _____

Tel no: _____

Child Help National Child Abuse Hotline 1 800 422 4453

Other numbers: _____

Reporting Suspected Abuse Confidential Recording Sheet

Organization: _____

Name of person reporting: _____

Name of child: _____

Age and date of birth: _____

Parent's/Guardian's name(s): _____

Home address/Tel no: _____

Are you reporting your concerns or reporting someone else's? Please give details

Brief description of what has prompted the concerns: include date, time, specific incidents.

Any physical signs? Behavioral signs? Indirect signs?

Have you spoken to the child? If so, what was said?

Have you spoken to the parent(s)? if so, what was said?

Has anybody been alleged to be the abuser? If so, please give details?

Have you consulted anybody else? Please give details

Person reported to and date of reporting: _____

Signature of person reporting: _____

Today's date: _____

Action taken: _____

Notes
