

# Report of Suspected Incident of Child Abuse

1. Name or worker (paid or volunteer) observing or receiving disclosure of child abuse: \_\_\_\_\_

2. Victim's name: \_\_\_\_\_

3. Age: \_\_\_\_\_ Birth date: \_\_\_\_\_

4. Date/Place of initial conversation with/report from victim: \_\_\_\_\_

\_\_\_\_\_

5. Victim's statement – Detailed summary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Name of person accused of abuse: \_\_\_\_\_

7. Relationship of accused to victim (paid staff, volunteer, family member, other) \_\_\_\_\_

8. Date and time of report to pastor: \_\_\_\_\_

9. Reporter: \_\_\_\_\_

10. Summary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11. Date of call to victim's parent/guardian: \_\_\_\_\_

12. Person placing call: \_\_\_\_\_

13. Spoke with: \_\_\_\_\_

14. Summary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15. Person placing call to child and family service agency:

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16. Date and time of call: \_\_\_\_\_

17. Spoke with: \_\_\_\_\_

18. Summary: \_\_\_\_\_

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19. Person placing call to local law enforcement agency: \_\_\_\_\_

20. Date and time of call: \_\_\_\_\_

21 Spoke with: \_\_\_\_\_

22. Summary: \_\_\_\_\_

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23. Other contacts: \_\_\_\_\_

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Signature

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Date