

# Sample School Form

## Suspected Abuse or Neglect Report

This information should only be shared with your immediate supervisor or others on a need-to-know basis due to the sensitive nature of the information contained within. Note that mandatory reporting laws may apply, and you may be required by law to report this information to local authorities.

<b>Your Information</b>	Name: _____ Title/Position: _____ Address: _____ Phone: _____ Supervisor: _____
<b>Injured Student</b>	Name: _____ Age: _____ Address: _____ Phone: _____ Parents/guardians: _____
<b>Suspected Perpetrator</b>	Unknown <input type="checkbox"/> Known <input type="checkbox"/> Name: _____ Age: _____ Description: _____ Relationship to suspected victim: _____ Address or location of suspected abuse: _____ _____ _____
<b>Reason for Report / Details of Incident</b>	_____ _____ _____ _____ _____ _____ _____
<b>Witnesses</b>	Name: _____ Phone: _____ Email: _____ Address: _____ Name: _____ Phone: _____ Email: _____ Address: _____

<b>Report Submitted To</b>	Name: _____ Phone: _____
	Email: _____
	Address: _____
	Date: _____ Time: _____
<p>Did you notify state/local authorities regarding suspected abuse/sexual misconduct? No <input type="checkbox"/> Yes <input type="checkbox"/></p> <p>If yes, list agency name: _____</p> <p>Name of contact: _____</p> <p>Phone: _____ Date: _____ Time: _____</p>	

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Date of report: \_\_\_\_\_ Time of report: \_\_\_\_\_

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