

Allegations of Child Abuse/Neglect Reporting Form

Name of Person Completing this Form: _____ Date/Time: _____

Children Services agency that report was made to: _____

Contact Person: _____

Law Enforcement Agency with Jurisdiction: _____

Allegation Description:

Name of person making the allegations: _____

Name of alleged victim: _____ D.O.B: _____

Address: _____

Legal Guardian: _____

Name of School: _____

Date/Time allegations made: _____ Date/Time of alleged abuse: _____

Location of alleged abuse: _____

Describe what is alleged to have happened. Include a description of the specific behaviors that are alleged to have occurred that would constitute abuse/neglect. Also include the type, extent, duration, and circumstances regarding the alleged abuse including evidence of previous injuries, current condition of the child, and any information that might be helpful in establishing cause. Attach additional pages as necessary.

Signature of Person Completing Form

Signature of Supervisor

Printed Name of Person Completing Form

Printed Name of Supervisor

Agency Use Only

- Abuse and Neglect information should be forwarded to the local police if living within the city limits and to the Sheriff if outside the city limits.
- The MUI form will be sent to ODMH only if the incident happened on agency premises or if the allegation of abuse was against a staff member