



THE UNIVERSITY OF ALABAMA SYSTEM OFFICE

CHILD ABUSE or NEGLECT REPORT FORM

To be promptly completed by a person who knows or, in good faith, suspects child abuse or neglect and, upon completion, provided to the police department of your respective campus.
(Please print all information.)

Date of Report: _____

Report Submitted To: _____

Report Submitted By: _____

Reporter's Home Telephone: _____

Reporter's Cellphone: _____

Reporter's E-mail Address: _____

Reporter's Address: _____

Name of Child Involved: _____

Child's Current Location (if known): _____

Contact Information of Child or Child's Parent/Guardian (if known):

Name of Accused: _____

Relationship of Accused to the Child: _____

Date/Time/Location of incident or observation:

Statement of what occurred or what was observed:

Provide a detailed description of every explicit detail you can remember and use direct quotations wherever possible. Please include in your statement evidence of previous injuries, if any, to the child and relevant information relating to the cause of any such injuries, including the identity of the person or persons responsible for the same. If additional room is needed, please continue statement on the back of the report.

CAUTION: Do not question a child for more information than they volunteer and do not solicit information from a person suspected of improper behavior. Leave that for trained officials.

