

1-855-503-7233

**Lebanon Community School District
Child Abuse Report Form**

ORS 418.750 requires that “any public or private official having reasonable cause to believe that any child with whom the official comes in contact in an official capacity has suffered abuse, or that any person with whom the official comes in contact in an official capacity has abused a child shall report or cause a report to be made....” Public officials include all school employees.

Information on Abuse Victim

Name of child: _____

Parent or guardian: _____

Address/City/Zip: _____

Phone: _____

Child's birth date: _____ Age: _____ Grade: _____

Date and time of alleged abuse occurrence: _____

Nature and extent of alleged abuse, including any evidence of previous abuse: _____

Explanation given for the suspected abuse:

Any other information that might be helpful in establishing the possible cause of the abuse:

Identity of Alleged Perpetrator (if known): _____

Record of Report

Report to Department of Human Services phone number: _____

Employee making the report: _____

Person taking the report: _____

Date of report: _____ Time: _____

Signature of person completing this report

Date

Case # _____

Do not file in child's school file

Copy: Personnel Office if alleged perpetrator is an employee

Copy: Building Principal

Copy: Superintendent's Office