



Reporting of Suspected Child Abuse or Neglect

Procedure:

1. School personnel will make an oral report within **forty-eight (48) hours** to the Department of Children, Youth and Families (DCYF) at 855-420-5888. This form is intended to provide reporters with information that is necessary for the report and to document that a report has been made.
2. If a crime may have been committed, the police must be notified: Kennewick Police Department Non-Emergency 509-628-0333.
3. Reporting school personnel must complete this form **and** send **original** to principal; email a **copy** to the K-12 Department: K-12@ksd.org

Please reference PowerSchool for demographic information.

Name of child: _____ Birthdate: _____ Grade: _____ Gender: M F X

Is the student Native American? Yes No Tribal affiliation: _____

Name of parent/guardian: _____ Address: _____

Home phone: _____ Work phone: _____

Siblings (name/birthdate/school): _____

Police contacted? Yes No

Name of officer: _____

Description of injury/cause of concern: (Be specific. Include nature of child’s injuries, neglect, maltreatment, name of alleged abuser if known).

Have there been previous reports of suspected abuse or neglect? _____

Reported by: _____ Date: _____

School: _____ Date of verbal report: _____

Name of intake worker: _____ Intake #: _____