

Warren County Schools

Child Abuse/Neglect Reporting Form

School: _____ Date of Report: _____

Age of Child: _____ Ethnic Category: _____ Sex: _____

Reported to (check all that apply):

- Principal Department of Social Services Other (specify)

Circumstances Leading to the Report (ex. observed bruises on student; student reported abuse by parent, etc.):

Feedback/Results:

Concerns, if any:
