

Child Abuse, Sexual Abuse, or Neglect Incident Report**Section 1- Instructions:**

This form is to be completed by the individual who witnesses, or has substantive information of child abuse, neglect, and/or sexual abuse of a minor. Make sure that the information provided below is factual and detailed as possible. Maintain a copy for your records. Submit to the Minors Program at minorspolicy@osu.edu or fax to (614) 292-6199. For consultation or questions, please contact the Director of Youth Protection at (614) 292-1404.

Unit name

Program

1. Did the alleged abuse/neglect occur on university property (or in an OSU activity/program)?

 Yes. No.

2. Is the alleged perpetrator OSU faculty, staff, appointee, student, student employee, graduate associate, or volunteer?

 Yes. No.

If you answered “yes” to either question, complete sections 2-4 below. If you answered “no” to both, complete sections 3 and 4.

Section 2- OSU-related incidents (only fill out if questions 1 and/or 2 above were answered yes):

If you answered yes to questions 1 and/or 2 above, whom can we contact for more information if needed?

Contact Name

Title

Unit

Phone number

Email

It is extremely important to notify University Police at 614-292-2121 immediately in these situations if you have not already, regardless of your campus/activity/program location.

Section 3- Describe the incident:

Date of incident or discovery

Time of incident or discovery

Where did the incident occur?

Body part(s) affected, if applicable

Briefly describe the incident that led you to making a report:

Section 4- Incident reported to: Children services agency name: _____ phone: _____ report #: _____

OR

 Local law enforcement name: _____ phone: _____ report #: _____

AND

 University Police name: _____ phone: _____ report #: _____

Report date: _____