

**TEMPE UNION HIGH SCHOOL DISTRICT
ARIZONA REVISED STATUTES SECTION 13-3620 REPORT
CHILD ABUSE, NON-ACCIDENTAL INJURY AND NEGLECT REPORT**

The following report form is for employees and other persons required to report to use to document and file reports made in compliance with ARS §13-3620. **All school personnel**, including but not limited to teachers, administrators, nurses, counselors, psychologists, social workers and any other person responsible for the care and treatment of a minor, **who reasonably believe that a minor is or has been the victim of physical injury, child abuse, or neglect (1) that appears to have been inflicted other than by accidental means, or (2) that is not explained by the available medical history as being accidental in nature, shall immediately report or cause a report of the information to be made by telephone or in person to a police officer or to Child Protective Services. A written report must then be submitted within seventy-two (72) hours.** The employee or other person required to report should turn this form into the Principal and also be certain the report is submitted consistent with law. **Each person required to report is personally responsible for making the required reports or ensuring that they are made by another person.**

THIS REPORT IS BEING MADE BY THE FOLLOWING INDIVIDUAL:

Printed Name of Reporting Employee _____

Position _____

Site Address _____

Telephone _____

THIS REPORT IS ABOUT ALLEGED OR SUSPECTED BEHAVIOR OF THIS INDIVIDUAL:

Name _____

Date of Alleged or Suspected Behavior _____

The individual named above is (check all that apply)

_____ An employee of TUHSD. State the site/job position: _____

_____ A student in TUHSD. State the site/program: _____

_____ Other (please describe): _____

THE ALLEGED VICTIM(S) IS/ARE:

Name(s), Addresses of Minor/Victim(s) _____

Age(s) _____

Victim's Parent(s) / Custodian(s) Names, Address(es) _____

Describe in detail the facts that led you to form a reasonable belief that a minor is or has been the victim of child abuse, physical injury or neglect, including who is the possible victim and perpetrator, what, when, where, and how you learned of the information. The report must include at least the following information. *(Additional sheets and/or documentation may be attached.)*

Nature and extent of Minor's abuse, injury or neglect:

(Nature and extent of Minor's abuse, injury or neglect - Continued from page 1)

Known previous abuse, injury or neglect:

Any other information you believe might be helpful in establishing the cause of the abuse, injury or neglect:

The information related in this report is accurate, as I know it on this date.

Signature of Reporting Employee

Date of Report

TO BE COMPLETED BY THE PRINCIPAL OR HIS/HER DESIGNEE:

This written report is being sent to the following agency(ies):

Police Department for (City)_____ Contact: _____ Phone: _____

Child Protective Services – Contact: _____ Phone: _____

Certified Mail Faxed Hand Delivered Date & Time of Delivery _____

An initial telephone or personal report was made by _____, as follows:

Date & Time Phone Number (if reported by phone) Person/Agency Receiving Report

Date & Time Phone Number (if reported by phone) Person/Agency Receiving Report

Printed name of Administrator submitting report

Signature of Administrator submitting report