



Washington Boro United Methodist Church
Report of Suspected Incident of Child Abuse

(Two Pages)

1. Name of worker observing or receiving disclosure of child abuse:

2. Victim's name: _____ Age: _____

3. Victim's statement: _____

4. Name of person accused of abuse: _____

5. Call to victim's parent/guardian:

a. Date and Time _____

b. Spoke with: _____

c. Summary: _____

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6. Call to local children and family service agency:

a. Date and Time: _____

b. Spoke with: _____

c. Summary: _____

7. Call to local law enforcement agency:

a. Date and Time: _____

b. Spoke with: _____

c. Summary: _____

Signature of Applicant and Date