Nye County School District

SUSPECTED CHILD ABUSE/NEGLECT REPORT FORM

(To be **Completed by Mandatory Reporter**, in conjunction with verbal phone call report, and **Returned to Site Administrator**)

Please print or type. Fill out as completely as possible. Do not delay submission due to lack of all requested information.

		N	NAME OF MANDATORY REPORTER				TITLE			
REPORTING PARTY										
	-	REPORTER'S SITE OF EMPLOYMENT					DID MANDATORY REPORTER WITNESS THE INCIDENT?			
AR.		S	School Name & Street Address City & Zip Code				☐ YES ☐ NO			
EP P							SIGNATURE TODAY'S DATE			
×							SIGNATURE		TODAT STATE	
		-	□ CPS (Child Protective Services) AGENCY CONTACTED)				
N		L	CPS (Child Protective Services) Or			,				
REPORT NOTIFICATION		l	LAW ENFORCEMENT (NYE COUNTY SHERIFF'S OFFICE)							
REPORT IIFICATI	•		Phone # used:		Ci	ty		DATE/TIME OF PH	ONE CALL	
EE E										
		О	OFFICIAL CONTACTED – NAME / TITLE							
4										
		N	NAME (LAST, FIRST, MIDDLE)			BIRTHDATE OR APPROX. AGE		GENDER	ETHNICITY	
. Е	-	L.	- DDDDGG G							
		Α	ADDRESS Street		City Zip			TELEPHONE		
	ŀ	p	PRESENT LOCATION OF VICTIM			SCHOOL		CLASS GRADE		
VICTIM One report per victim		1.	PRESENT EOCATION OF VICTIM			SCHOOL		CLASS		
VICTIM	-	P	PHYSICALLY DISABLED? DEVELOPMENTALLY DISA		LED?	OTHER DISABILITY (SPECIFY)		PRIMARY LANGUAGE SPOKEN IN HOME		
VIC			□ YES □ NO	☐ YES ☐ NO		` ,				
ne r		Iì	N FOSTER CARE?	IF VICTIM WAS IN OUT-OF-H	HOME CARE AT TIME OF	OF INCIDENT, CHECK TYPE OF CARE:		TYPE OF ABUSE (CHECK ONE OR MORE) PHYSICAL MENTAL SEXUAL NEGLECT		
			☐ YES	☐ DAY CARE ☐ CHILD CA	RE CENTER	ER FAMILY HOME				
			□ NO	☐ FAMILY FRIEND ☐ GRO	OUP HOME OR INSTITUTI					
		R	RELATIONSHIP TO SUSPECT			PHOTOS TAKEN?		☐ OTHER (SPECIFY)		
					☐ YES [
	ď.S	S	NAME	BIRTHDATE	GENDER ETHNICIT	Y NAI	ME	BIRTHDATE	GENDER ETHNICITY	
	~	Ö								
	CTIM	3LING	1.			3.				
	VICTIM'S	SIBLINGS	1. 2.			3. 4.				
	_	1	1. 2. NAME (LAST, FIRST, MIDDLE)			4.	OR APPROX. AGE	GENDER	ETHNICITY	
S	_	ANS SIBLING	NAME (LAST, FIRST, MIDDLE)			4. BIRTHDATE				
TIES	_	1		City	Zip	4.		GENDER BUSINESS PHON		
ARTIES	_	1	NAME (LAST, FIRST, MIDDLE) ADDRESS Street	City	Zip	BIRTHDATE HOME PHON	Е	BUSINESS PHON	NE	
D PARTIES	_	1	NAME (LAST, FIRST, MIDDLE)	City	Zip	BIRTHDATE HOME PHON				
VED PARTIES	_	1	NAME (LAST, FIRST, MIDDLE) ADDRESS Street	City		HOME PHON BIRTHDATE	E OR APPROX. AGE	BUSINESS PHON GENDER	NE ETHNICITY	
OLVED PARTIES	_	1	NAME (LAST, FIRST, MIDDLE) ADDRESS Street NAME (LAST, FIRST, MIDDLE)	City	Zip Zip	BIRTHDATE HOME PHON	E OR APPROX. AGE	BUSINESS PHON	NE ETHNICITY	
INVOLVED PARTIES	_	1	NAME (LAST, FIRST, MIDDLE) ADDRESS Street NAME (LAST, FIRST, MIDDLE)	City		HOME PHON HOME PHON HOME PHON	E OR APPROX. AGE	BUSINESS PHON GENDER BUSINESS PHON	NE ETHNICITY	
INVOLVED PARTIES	VICTIM'S	PARENTS/GUARDIANS	NAME (LAST, FIRST, MIDDLE) ADDRESS Street NAME (LAST, FIRST, MIDDLE) ADDRESS Street SUSPECT'S NAME (LAST, FIRST)	City		HOME PHON HOME PHON HOME PHON	E OR APPROX. AGE E	BUSINESS PHON GENDER BUSINESS PHON () -	NE ETHNICITY	
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Child Protective Services Pahrump (775) 727-8497

Fallon (775) 423-8566

Nye County Sheriff's Office

Pahrump (775) 751-7000

Beatty (775) 553-2345

Tonopah (775) 482-8101