EXHIBIT J-6281 © **EXHIBIT JLF-EA**

REPORTING CHILD ABUSE / CHILD PROTECTION

SUSPECTED ABUSE, PHYSICAL INJURY, CHILD ABUSE,
REPORTABLE OFFENSE OR NEGLECT

To: Child Protective Services, D.E.S. (or law enforcement agency)

Student's Name _____ Birth date _____ Sex _____

Address _____

Names of parents/guardians _____

E-mail address _____

School _____ Grade ____ Teacher _____

Description of suspected present or prior abuse, child abuse, physical injury, or neglect (use additional page if necessary)

_____

_____

_____

Symbols:

A = Abrasion
Bl = Blister
Bu = Burn
Br = Bruise
La = Laceration
Le = Lesions
S = Scar
R = Rash
V = Vermin
O = Other (describe)

Severity:

(1) = Mild
(2) = Moderate
(3) = Severe

_____ _____

Signature and Title of Person Making the Report Date

Oral Report to:

Name _____

Agency _____ Position _____

Date _____ Time _____

Written report to _____ Date _____

Copy filed in school nurse's office