

Reporting Information
(ALL FIELDS MUST BE COMPLETED or Marked N/A)

Oklahoma Department of Human Services (Mandatory in all cases)

Date of DHS Hotline (800-522-3511) Notification: _____
Time of DHS Hotline (800-522-3511) Notification: _____
Name of DHS Hotline Employee Contacted: _____
DHS Case/Confirmation Number: _____

Law Enforcement (Mandatory in all cases)

Date of Law Enforcement Notification: _____
Time of Law Enforcement Notification: _____
Agency and Law Enforcement Employee Contacted: _____
Method of Communication with Law Enforcement: _____
Case or Report Number: _____

Oklahoma Bureau of Narcotics and Dangerous Drugs Control (OBNDCC)
(Mandatory only if suspected child trafficking)

Date of OBNDCC Hotline (800-522-8031) Notification: _____
Time of OBNDCC (800-522-8031) Notification: _____
Name of OBNDCC Hotline Employee Contacted: _____
OBNDCC Case/Confirmation Number: _____

Signature of Reporting Employee
Date Report Completed: _____
Time Report Completed: _____

ABUSE, NEGLECT, EXPLOITATION AND TRAFFICKING REPORT FORM

Any District employee having reasonable cause to believe that a student is the victim of abuse, neglect, or exploitation must IMMEDIATELY report this matter to the Oklahoma Department of Human Services (DHS) through the hotline designated for this purpose (800-522-3511) and to local law enforcement. In addition to reports to DHS and local law enforcement above, employees must report suspected child trafficking to the Oklahoma Bureau of Narcotics and Dangerous Drugs Control (OBNDCC) at 800-522-8031.

An employee should also provide notice to the school principal or other school official that a report was made to DHS, local law enforcement, and/or OBNDCC, and provide relevant information on the report for the District's records.

Instructions:

This form should be completed in full and immediately delivered to the school site principal. If for some reason the reporting party believes the principal is not the appropriate individual to receive the report, then this completed form should be immediately delivered to the superintendent.

Reporting Employee Information

Reporting Employee Name: _____
Title/Position: _____
Date & Time notified of suspected abuse, neglect, exploitation or trafficking: _____

Student Information

Student Name: _____
Student Address: _____
Student DOB/Age: _____
Student ID Number: _____
Parent/Guardian: _____
Parent/Guardian Contact #: _____

Description of suspected abuse, neglect, exploitation or trafficking and other information and/or document(s) (including information regarding any previous incidents) know to the reporting party (attached separate page if additional space needed):

(See Next Page)