

Activities and Programs with Minor Participants Office of Human Resources – Policy 1.50 Child Abuse, Sexual Abuse, or Neglect Incident Report

Section 1- Instructions:

abuse of a minor. Make sure tha	t the information pr rdinator, <u>minorspoli</u>	ovided below is factual and detailed cy@osu.edu or fax to (614) 292-619	nation of child abuse, neglect, and/or sexual las possible. Maintain a copy for your records. 99. For consultation or questions, please	
Unit name		Program		
1. Did the alleged abuse/neglect occur on university property (or in an OSU activity/program)?				
Yes. No.				
	SU faculty, staff, ap	pointee, student, student employee,	graduate associate, or volunteer?	
Yes. No.	• . 1			
		, complete sections 2-4 below	v. If you answered "no" to both,	
complete sections 3 and	4.			
Section 2- OSU-related incidents (onl	v fill out if questions 1 a	nd/or 2 above were answered ves):		
(4	J 1			
If you answered yes to question	s 1 and/or 2 above,	whom can we contact for more infor	mation if needed?	
Contact Name		Title		
Contact Ivanic		THE		
Unit		Phone number	Email	
Section 3- Describe the incident	• ,	ardless of your campus/ac	ctivity/program location.	
Date of incident or discovery		Time of incident or discovery		
Where did the incident occur?		Body part(s) affected,	Body part(s) affected, if applicable	
Briefly describe the incident that	at led you to making	a report:		
Section 4- Incident reported to:				
Children services agency	name:	phone:	report #:	
OR		-	-	
Local law enforcement	name:	phone:	report #:	
250ar ia emoreement	<u> </u>	phone.	report iii	
AND				
University Police	name:	phone:	report #:	
•	·	·		
Report date:				