



Dharma Rain

Zen Center

SUSPECTED ABUSE/NEGLECT REPORT FORM

Reporting Party : _____

Date/Time: _____ Reporting Party Phone: _____

Suspected Victim: _____ Age/DOB _____

Address: _____ Telephone: _____

Suspected Abuser: _____

Age: _____ Relationship to Victim: _____

Address: _____ Telephone: _____

Incident Information: (*Attach additional pages as needed*)

Date/Time of Incident: _____ Place of Incident: _____

Narrative description of what you heard or observed that led you to believe a vulnerable person has been abused or neglected. Describe the nature and extent of the alleged abuse or neglect, evidence of previous mistreatment and explanation given for the mistreatment.

Suspected Abuse/Neglect Report Made To:

Local Law Enforcement: Portland Police Bureau & Multnomah County Sheriff: 503- 823-3333

Department of Human Services, Child Abuse Hotline: 503-731-3100

Distribution: The following parties will receive a copy of this report form

Board of Directors Safe Environment Committee Dharma School Director

Other Parties: _____