Report of Child(ren) Alleged to be Suffering from Serious Physical or Emotional Injury by Abuse or Neglect

Massachusetts law requires an individual who is a mandated reporter to immediately report any allegation of serious physical or emotional injury resulting from abuse or neglect to the Department of Social Services by:

1. Immediately reporting by oral communication; and
2. Completing and sending this written report to the appropriate Department of Social Services' office within 48 hours of making the oral report.

Please complete all sections of this form. If some data is unknown, please signify. If some data is uncertain, place a question mark after the entry.

▼ Data on Children Reported

<table>
<thead>
<tr>
<th>Name</th>
<th>Current Location / Address</th>
<th>Sex</th>
<th>Age or Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>Male</td>
<td>Female</td>
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<tr>
<td></td>
<td></td>
<td>Male</td>
<td>Female</td>
</tr>
</tbody>
</table>

▼ Data on Male Guardian or Parent

Name:  
First:  
Last:  
Middle:  
Address:  
Street and Number:  
City / Town:  
State:  
Zip Code:  
Phone #:  
Age:  

▼ Data on Female Guardian or Parent

Name:  
First:  
Last:  
middle:  
Address:  
Street and Number:  
City / Town:  
State:  
Zip code:  
Phone #:  
Age:  

▼ Data on Reporter / Report

Report Date:  
Mandatory Report:  
Voluntary Report:  
Reporter’s Name:  
First:  
Last:  
middle:  
(If the reporter represents an institution, school or facility, please indicate)
Reporter’s Address:  
Street and Number:  
City / Town:  
State:  
Zip code:  
Phone #:  
Has reporter informed caretaker of report:  
Yes:  
No:  

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What is the nature and extent of injury, abuse, maltreatment, or neglect, including prior evidence of same? (Please cite the source of this information if not observed firsthand.)

What are the circumstances under which the reporter became aware of the injuries, abuse or maltreatment, or neglect?

What action has been taken thus far to treat, shelter, or otherwise assist the child(ren) to deal with the situation?

Please give other information that you think might be helpful in establishing the cause of the injury and/or the person(s) responsible for it. If known, please provide the name(s) of the alleged perpetrator(s)?

Signature of Reporter: