

**Confidential Student Maltreatment Reporting Form**

Date Submitted: \_\_\_\_\_

MDE File #: \_\_\_\_\_ (MDE staff use only)

**REPORTER (name of person completing form) Reporter is confidential under Minnesota Statutes, section 626.556.**

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Mandated Reporter: Yes \_\_\_ No \_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**SCHOOL INFORMATION**

ISD #: \_\_\_\_\_ School District: \_\_\_\_\_ Program Name: \_\_\_\_\_  
School Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Principal/Director: \_\_\_\_\_ Phone: \_\_\_\_\_ (Ext): \_\_\_\_\_  
Transportation Company (if necessary): Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**ALLEGED VICTIM (Complete one reporting form for each alleged victim)**

Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_  
Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_  
Gender: Male \_\_\_ Female \_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_ Ethnicity: \_\_\_\_\_  
Special Education: Yes \_\_\_ No \_\_\_ Disability Description: \_\_\_\_\_ State Student ID: \_\_\_\_\_

**ALLEGED OFFENDER**

Name: \_\_\_\_\_ Position: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender: Male \_\_\_ Female \_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Ethnicity: \_\_\_\_\_ Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_  
Licensed: Yes \_\_\_ No \_\_\_ If licensed, name of licensing board: \_\_\_\_\_ Folder #: \_\_\_\_\_

**INCIDENT**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location (i.e. - bus, classroom): \_\_\_\_\_  
Address (if different than school): \_\_\_\_\_ County: \_\_\_\_\_  
Witness Contact Information: \_\_\_\_\_  
Police Notified: Yes \_\_\_ No \_\_\_ Police Department: \_\_\_\_\_  
Police Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Case No.: \_\_\_\_\_

**Alleged Maltreatment:** Physical Abuse \_\_\_ Sexual Abuse \_\_\_ Neglect \_\_\_ Unknown \_\_\_ **Injury:** Yes \_\_\_ No \_\_\_ Unknown \_\_\_

Description of Incident and Injury: (please attach additional page if needed).

\_\_\_\_\_