

Case #: _	
Name - OCS intake person:	
Time/Da	nte:

## REPORT OF ABUSE OR NEGLECT CONFIDENTIAL

REPORT BY PHONE: 1-800-478-4444

Office of Children's Services

Ketchikan Police Department: 907-225-6631 Alaska State Troopers: 907-225-5118

ReportChildAbuse@alaska.gov

Fax: 907-269-3939

The Office of Children's Services 323 E. Fourth Avenue Anchorage, AK 99501

Person Initiating Report:		School:				
Occupation:		Relationship to victim:				
Name(s) of victim(s):		DOB:	Se	Sex:		
Address & Phone #:						
Date of suspected abuse/neglect:						
Category (Circle any that may apply):	Sexual Abuse	Physical Abuse Neglect	t Mental Injury	Other		
(Describe "Other" if circled):						
Brief description of reasons for believing	g that abuse or neglec	et has occurred:				
Name of Child's Parent(s) or Guardian:						
Address/Phone #:						
Were photos taken of injuries? Ye	es No	Were police notified	d? Yes	No		
Was a medical examination done? Ye	es No					
Additional Information:						
When was principal notified of call to C	OCS? (Date & Time)					
Signature:		Date Date:		Time		

Note: This Report of Abuse of Neglect is provided to the Alaska Department of Health and Social Services pursuant to AS 47.17.020. This report is confidential and is not subject to public inspection and copying. It may be divulged only to those governmental agencies with child protection functions in connection with investigations for judicial proceedings involving child abuse, neglect or custody. It is not discoverable under Criminal Rule 16. Any person who unlawfully makes public information contained herein is guilty of a misdemeanor.



## KETCHIKAN GATEWAY BOROUGH SCHOOL DISTRICT

## **REQUEST FOR INTERVIEW - CHILD ABUSE**

of child physical or s	exual abuse is being	conducted by the		
• ,				
	n the District permits	the Department or		
school time.				
*******	********	*******		
ncy), I formally reque	est that the Ketchika	n Gateway Borough		
(child's name) for the purpose of conducting				
on, pursuant to AS	47.17.027. I certify th	nat: (1) there is		
ed or neglected by a	person responsible fo	or the child's welfare		
le for the child's wel	fare; (2) an interview	at school is a		
the child has been al	oused or neglected; a	nd (3) the interview		
request that the Ke	tchikan Gateway Bor	rough School District		
cted in the presence	of the principal or d	esignee, unless the		
fere with the investig	gation, and that the c	hild's parent,		
y my department or	agency unless it appe	ears that such		
al Services/Law Enf	orcement Agency:			
	(Date)			
Y	N			
Y	N			
	(Date)			
	comment agency; 2) is comment agency; 2) is comment agency; 2) is comment agency; 2) is comment agency. I formally request on, pursuant to AS and or neglected by a le for the child's well the child has been all request that the Kentager with the investigation or agreement or all Services/Law Enforces.	**************************************		

**NOTE**: The interview shall be conducted in the presence of the principal or designee, unless a determination has been made by the Department of Health and Social Services or law enforcement agency that such presence will interfere with the investigation.