**CONFIDENTIAL ** **CONFIDENTIAL ** **CONFIDENTIAL ** ABUSE/MOLESTATION INCIDENT REPORT FORM

REVISED: 4-10-19

Reporting abuse can precipitate severe consequences to an individual and family. It should never be done casually or thoughtlessly, and certainly not for malicious purposes. At the same time, failing to report abuse can have severe consequences to a child at risk. Therefore, if you have reasonable cause to suspect abuse by anyone toward a minor, you should document and report incidents to the appropriate age-group pastor/minister and the Senior Pastor.

I have observed conduct that I feel would fall under the definition of sexual abuse as defined in Grace Life Baptist Church policy:

DEFINITION OF CHILD SEXUAL ABUSE: The National Resource Center on Child Sexual Abuse defines child sexual abuse as:

"any sexual activity with a child, whether in the home by a caretaker, in a day-care situation, in any organized ministry, whether at the main facility (church) or away, or in any other setting, including on the street by a person unknown to the child. The abuser may be an adult, an adolescent, or another child provided the child is four (4) years older than the victim."

Child sexual abuse can be violent or non-violent. It is criminal behavior that involves children in sexual behavior. Child sexual abuse can involve fondling; penetration of the oral, genital and anal areas; intercourse; and forcible rape. Other forms of abuse can include: verbal comments, pornographic videos, obscene phone calls, exhibitionism, or allowing children to witness sexual activity.

I have observed conduct that I feel would fall under the definition of sexual abuse as defined in Grace Life Baptist Church policy. I understand that this material is to be treated as highly confidential and that I am not to discuss it with anyone else other than the age-group pastor/minister and the Senior Pastor to whom I make this report.

Your Name:	Date of Report:
REPORT OF THE INCIDENT:	
Date of incident:	Time Incident Occurred:
Suspected Abuser's Name:	
Minor's Name (victim):	
Describe nature of the incident:	

Personal observations of indications of suspected abuse that are not readily explained: (check any or all that apply)

Physical Abuse	Sexual Abuse
☐ <u>unexplained bruises</u>	child reports abuse by others
□ welts	has difficulty walking or sitting
☐ <u>lacerations</u>	☐ torn, stained or bloody underclothing
□ <u>burns</u>	☐ complaints of pain or itching in genital
☐ <u>fractures</u>	<u>area</u>
☐ <u>abdominal injuries</u>	☐ bruises or bleeding in external genitalia,
□ <u>human bites</u>	vaginal or anal area
☐ child unusually wary of physical contact	 unusual interest in or knowledge of sexual
with adults	<u>matters</u>
☐ demonstrates extremes in behavior	☐ unusual and excessive behaviors
seems frightened of parents or caretaker	inappropriate for a child of that age
The above report is true and correct, based on my p	personal observations.
Signature of Reporter	Date
Received by:	
Staff Member	Date

Submit completed reports to the appropriate age-group pastor/minister and Senior Pastor