



Northeastern
Catholic District
SCHOOL BOARD

RECORD OF INFORMATION Duty to Report

Employees and volunteers of the NCDSB may use this form to document facts relating to disclosure or suspected child abuse or neglect. Upon exercising your duty to report, this information is provided to the Principal for confidential filing in a secure location.

STUDENT INFORMATION

Student's LEGAL Name			
Date of Birth (MM-DD-YYYY)			
Age		Grade	
Address			
Parent/Guardian Name			

DOCUMENTATION OF INFORMATION (Record the facts of what was seen or heard)

PERSON FULFILLING DUTY TO REPORT

Name	
Position	
Date and Time	
Name of child welfare agency reported to	<input type="checkbox"/> North Eastern Ontario Family and Children's Services <input type="checkbox"/> Kunuwanimano Child and Family Services <input type="checkbox"/> Payukotayno Family Services <input type="checkbox"/> Police Services (please specify): <input type="checkbox"/> Other agency (please specify):
Name of Person reported to	
Position	