

Confidential Notice of Concern

Date of occurrence: _____

Time of occurrence: _____

Type of Concern:

_____ Harassment

_____ Exploitation

_____ Policy violation with a minor

_____ Possible risk of abuse

_____ Known or suspected abuse. Has this been reported to TDFPS at 1.800.252.5400?

If yes, Report # _____ Time/Date of Report _____

_____ Other concern: _____

Describe the situation: What happened, where it happened, when it happened, who was involved, who was present, who was notified? If reported to TDFPS, what was their recommendation about investigating?

Has this situation ever occurred previously? _____

What action was taken? How was the situation handled, who was involved, who was questioned, were police called?

What is the follow-up plan? Does anyone else need to be notified? Will the situation need monitoring? Would you like someone to call you to discuss this situation?

Submitted by: _____ Telephone number: _____

Location and address: _____

Signature: _____ Date: _____

Reviewed by: _____ (Vicar General's Signature)