

#### FLORIDA ABUSE HOTLINE Fax Transmittal Form To Report Abuse/Neglect/Threatened Harm/Exploitation Fax Number: 1-800-914-0004

TO LEARN MORE ABOUT REPORTING ABUSE, READ THE DEPARTMENT OF CHILDREN AND FAMILIES BROCHURE: REPORTING ABUSE OF CHILDREN AND VULNERABLE ADULTS.

<b>REPORTER INFORMATION</b> This information is required for professionally mandated reporters – please refer to Chapter 39, Florida Statutes.								
Your Last Name:	Your First	Your First Name: Today's Date:						
Your Occupation:	Your Agency:			Fax #:	Pho-	Phone #:		
Work Address:		City:	Z	Zip Code:	County:	State:		
Alternate Contact Person:		Title:			Phone #:			
Would you like to be notified as to whether or not an abuse report was accepted based on the information provided? Yes No If yes, please indicate your preferred method of notification. Telephone or U.S. Mail								
VICTIM INFORMATION If the victim is a child, list other children and adult household members in the home. If any household members have a disability, describe the disability in the DESCRIPTION OF INCIDENT section on page 2; if the victim is an adult, include how his/her ability to care for or protect self is impaired.								
Current Location/Address:		City:	Z	Zip Code:	County:	State:		
Home Address:	Apt/Lot#:	City:	7	Zip Code:	County:	State:		
Home Phone:	Work Phone:		Cell Phone:					
LAST NAME	FIRST NAME	DOB	SEX	RACE	SSN	IS THIS PERSON A VICTIM?		
(1)						Yes No		
(2)						Yes No		
(3)						Yes No		
(4)						Yes No		
(5)						🗌 Yes 🔝 No		
PERSON(S) RESPONSIBLE FOR ALLEGED ABUSE, NEGLECT, ABANDONMENT OR EXPLOITATION								
NA (1)	ME	DOB	SEX	RACE	SSN	RELATIONSHIP TO VICTIM		
(1)								
(2)								
(3)								

### DESCRIPTION OF INCIDENT

Please describe what happened, v	when and where the incident occurre	d, the frequency of occurrence, and a description	of injuries and/or threat	of harm.
WHAT happened?				
WHEN and WHERE did the incident occur?				
Does anyone in the household have any dis	abilities?			
Are there any dangers to a protective invest	igator?			
Additional Addresses (e.g. day-care, school	, etc.):			
Description of injuries/threat of harm:				
FOR ADULT VICTIMS ONLY: Describe how the	ne adult victim's ability to care for or	protect self is impaired.		
		RINDIVIDUALS		
Please	ist others who might be aware of the	abuse/abandonment/neglect/exploitation of the v		
NAME	RELATIONSHIP TO THE VICTIM	ADDRESS	HOME PHONE	WORK PHONE

# DO NOT SEND COPIES OF MEDICAL NOTES, CASE FILES, ARREST REPORTS, OR SIMILAR DOCUMENTS.

Transmittal of this form to the Florida Abuse Hotline is one reporting option. You may also call the Hotline voice mail at 1-800-770-0953 and leave a report. However, the preferred option for the Department of Children and Families is for you to call 1-800-96-ABUSE, and talk to a Hotline counselor. This third option must be used in all cases of abuse, abandonment and/or neglect that involve emergency or critical situations.

The information in this fax will be assessed to see if it meets the legal criteria as a report for investigation. It is extremely important that all information be completed. Add extra pages if this format is too limited in the space provided for response. Your fax cannot be properly assessed for a report without the requested information. A means to locate the victim is required. By law (Chapters 39, Florida Statutes), your identity as the reporter will be protected. It is important to have your telephone number in case additional information is needed to process your fax. Also, identify others who might be aware of the abuse/abandonment/neglect of the victim. **Please type or print legibly.** Indicate if you want a faxed response from the Hotline verifying receipt of this fax.

If you are unable to use this fax form, send a report that includes the following information:

- 1. concise description of the abuse, neglect and/or exploitation;
- 2. concise description of injuries/threat of injuries and date of occurrence;
- 3. the name of the victim(s), alleged perpetrator(s) and witnesses, and their birth dates, full addresses, telephone and social security numbers;
- 4. your name and means to contact (required for professional reporters of child abuse and/or neglect); and
- 5. how frequently does the abuse, abandonment and/or neglect occur and when was the last known incident (prior to this incident).

**Please do not send copies of medical case notes, case files, arrest reports, etc**. It takes longer to process these documents and this delays service to other victims and customers.

## TIPS FOR SUCCESSFUL FAX REPORTING

The Florida Abuse Hotline has prepared the following information for professionally mandated reporters to assist in making reports of child abuse, abandonment and neglect. When sending a fax to the Florida Abuse Hotline, please consider the following:

### • Please use our form.

• If you cannot use our form, please send a concise description of the situation.

Please include the following information:

- victim and perpetrator names
- reporter name (required for professional reporters of child abuse/neglect)
- full addresses for report subjects, including a numbered street address, apartment or lot number, city and zip code
- telephone numbers, including area code
- dates of birth
- Social Security numbers
- a brief description of the abuse, abandonment or neglect, including physical, mental or sexual injuries
- names and phone numbers and/or addresses of witnesses and important others
- the relationship of the perpetrator to the victim.
- Please print or write in a legible manner. Type, if possible.
- Please do not use profession specific language, i.e. "fx" for fracture.
- Please do not send copies of medical notes, case files, arrest reports, etc.
- Always phone in information concerning emergency or critical situations. The time frame involved in processing a fax may be longer than the time used in processing a phone call, which may delay assistance to victims.

We realize that your time is valuable, and the staff at the Florida Abuse Hotline are committed to making the reporting process as convenient as possible.