



Holy Spirit Lutheran Church

Safe Haven Report

This form is to be completed in compliance with our HSLC Safe Haven Policy when there has been an incident of concern, a disclosure shared, or a report filed with CPS or local law enforcement. This document will be kept in the Safe Haven Disclosure File in a locked and secure location on HSLC campus.

Person completing this Report: _____

Date: _____ Contact #: _____

Address: _____ City _____ State _____

Email _____

Name of child whom concern is about: _____

Name of adult whom concern is about: _____

Was this disclosure/incident reported to CPS? Yes No When? _____

To Whom? _____

Was this disclosure/incident reported to law enforcement? Yes No When? _____

To Whom? _____

Was this disclosure/incident reported to the HSLC Response Team? Yes No When? _____

To Whom? _____

Please document what was witnessed including details such as dates, names, quotes from child(ren) and visual signs of reasonable cause to believe that abuse or neglect has occurred:

Please use backside for additional details