**Hotline Fax Number (317-234-7595 OR 317-234-7596)**

**Email address:** [**dcshotlinereports@dcs.in.gov**](mailto:dcshotlinereports@dcs.in.gov)

**Report Source**

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Position | School Address | Phone Number |
| *Name* | *Position* | *School Address* | *Phone Number* |

**Child Information**

***(Include all children in the home)***

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Date of Birth** | **Gender** | **American Indian/ Alaskan Native tribe?** | **If yes, what tribe?** | **Address** | **School Attended** | **Grade Level** | **Current Location** |
| *Child’s Name* | *DOB* | *Gender* | Yes  No | *Tribe* | *Address* | *School* | *Grade* | *Current Location* |
| *Child’s Name* | *DOB* | *Gender* | Yes  No | *Tribe* | *Address* | *School* | *Grade* | *Current Location* |
| *Child’s Name* | *DOB* | *Gender* | Yes  No | *Tribe* | *Address* | *School* | *Grade* | *Current Location* |
| *Child’s Name* | *DOB* | *Gender* | Yes  No | *Tribe* | *Address* | *School* | *Grade* | *Current Location* |
| *Child’s Name* | *DOB* | *Gender* | Yes  No | *Tribe* | *Address* | *School* | *Grade* | *Current Location* |
| *Child’s Name* | *DOB* | *Gender* | Yes  No | *Tribe* | *Address* | *School* | *Grade* | *Current Location* |

**Parent/Guardians**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Role** | **Date of Birth** | **Gender** | **American Indian/ Alaskan Native tribe?** | **If yes, what tribe?** | **Address** | **Phone Number** |
| *Name* | Perpetrator Uninvolved | *DOB* | *Gender* | Yes  No | *Tribe* | *Address* | *Phone Number* |
| *Name* | Perpetrator  Uninvolved | *DOB* | *Gender* | Yes  No | *Tribe* | *Address* | *Phone Number* |
| *Name* | Perpetrator  Uninvolved | *DOB* | *Gender* | Yes  No | *Tribe* | *Address* | *Phone Number* |
| *Name* | Perpetrator  Uninvolved | *DOB* | *Gender* | Yes  No | *Tribe* | *Address* | *Phone Number* |

**Nature of Complaint**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Child** | **Total Absences** | **Excused Absences** | **Unexcused Absences** |
| *Child’s Name* | *Total Absences* | *Excused Absences* | *Unexcused Absences* |
| *Child’s Name* | *Total Absences* | *Excused Absences* | *Unexcused Absences* |
| *Child’s Name* | *Total Absences* | *Excused Absences* | *Unexcused Absences* |
| *Child’s Name* | *Total Absences* | *Excused Absences* | *Unexcused Absences* |
| *Child’s Name* | *Total Absences* | *Excused Absences* | *Unexcused Absences* |
| *Child’s Name* | *Total Absences* | *Excused Absences* | *Unexcused Absences* |

**Adverse Impact**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Child** | **Average Grades** | **Current Grades** | **Risk of Retention** | **IEP/Special Needs?** |
| *Child’s Name* | *Average Grades* | *Current Grades* | Yes  No | *IEP/Special Needs?* |
| *Child’s Name* | *Average Grades* | *Current Grades* | Yes  No | *IEP/Special Needs?* |
| *Child’s Name* | *Average Grades* | *Current Grades* | Yes  No | *IEP/Special Needs?* |
| *Child’s Name* | *Average Grades* | *Current Grades* | Yes  No | *IEP/Special Needs?* |
| *Child’s Name* | *Average Grades* | *Current Grades* | Yes  No | *IEP/Special Needs?* |
| *Child’s Name* | *Average Grades* | *Current Grades* | Yes  No | *IEP/Special Needs?* |

**Attempts to Communicate with Parents**

|  |  |
| --- | --- |
| **Attempts** | **Results** |
| Phone Calls: *Dates of Attempts* | *Results* |
| Emails: *Dates of Attempts* | *Results* |
| Attempted Home Visits: *Dates of Attempts* | *Results* |
| Other Contact: *Describe* | *Results* |

**Worker Safety**

|  |  |
| --- | --- |
| Safety concerns present such as dangerous animals or contagious diseases? | *Describe* |
| Are you aware of any incidents of domestic violence in the home? | *Describe* |