

CONFIDENTIAL NOTICE OF CONCERN TO THE CANON TO THE ORDINARY

To be filled out immediately by the complainant with as much detail as possible. Give this report to the director or program supervisor (fax to 442-2238). Use additional sheets if necessary. PLEASE PRINT.

Individual(s) of concern: _____

Date of occurrence: _____ Time of occurrence: _____

Type of concern:

- | | | |
|--|--|---|
| <input type="checkbox"/> Inappropriate comments with child, youth or other staff behavior with a child or youth. | <input type="checkbox"/> Possible risk of abuse.
<input type="checkbox"/> Inappropriate behavior within a Pastoral Relationship | <input type="checkbox"/> Possible risk of an inappropriate relationship between adults of unequal power |
| <input type="checkbox"/> Policy violation with a child or youth. | <input type="checkbox"/> Policy violation with those served in ministry | <input type="checkbox"/> Other concern: |

Specific Information:

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

Has this situation ever occurred previously [] yes [] no If yes: What action was taken?

How was the previous situation handled, who was involved, who was questioned, were police called?

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

Contact Information:

Submitted by: _____ Telephone Number: _____

Location and address: _____

Signature: _____ Date: _____

Diocesan Office Use Only:

Reviewed by: _____ Date: _____

Action Taken:
