



Loudonville-Perrysville Exempted Village School District

Office of the Superintendent

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Report of Student Abuse/Neglect

Student Name: _____ Grade: _____

Student Address: _____

Home/ Mobile Phone Number @ Home: _____

Person Reporting: _____ Position: _____

Mother's/ Guardian's Name: _____

Father's/ Guardian's Name: _____

Date of Oral Report: _____ Date of This Report: _____

Explain nature of abuse/ neglect:

Provide any information about the student's background and behavior in school that would be helpful to the investigation: