



**Diocese of Rockville Centre**  
Office for the Protection of Children and Young people  
Incident Management and Reporting System

<p>Name: _____</p> <p>Address: _____</p>	<p>Name: _____</p> <p>Date of Birth _____</p> <p>Gender _____</p> <p>Address _____</p>
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<p>Person Reporting: _____</p> <p>Date Reported _ _</p> <p>Time Reported _ _</p>	<p><u>Allegation of Sexual Abuse</u></p> <p>Sexual Abuse _____</p> <p><u>Sexual Assault</u></p> <p>Rape/Sodomy _____</p> <p>X Other Sexual Assault _ _</p> <p>OTHER _____</p>
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<p>Incident Date: _ _</p> <p>Incident Time: _ _</p> <p>Location:</p> <p style="padding-left: 20px;">XXX Rectory _____</p> <p style="padding-left: 20px;">XXX Church Property _____</p> <p><input type="checkbox"/> Off grounds _____</p> <p><input type="checkbox"/> Vehicle _____</p> <p><input type="checkbox"/> Other/specify: _ _</p>
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<p>Narrative Description: Description of Incident (Who? What? Where? Why? How?) Provide names of witnesses, etc. (if needed, use additional paper)</p> <p>Signature/ Title: _ _</p> <p>Date: _ _</p> <p><b>Follow-up:</b> Specify Findings for Follow-up, Actions Taken, Recommendations, Interventions, Policy and Procedure changes.</p>
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<p><u>Contributing Factors for Incident:</u></p>
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- Alcohol Use/Abuse
- Substance Abuse \_\_\_\_\_

Notifications:

	Person Contacted	Date	Person Making Contact
Bishop's Office/Delegate		___/___/___	
Local Police Precinct _____		___/___/___	
David DeCerbo, Esq Nixon Peabody  William Chapin		___/___/___	

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