



Milford Public Schools

31 West Fountain Street • Milford, Massachusetts 01757
www.milfordpublicschools.com • Telephone: 508-478-1100 • Facsimile: 508-478-1459

Procedure for Filing a 51-A

1. An oral report must be filed with the Department of Children and Families (DCF) immediately upon report of suspected abuse and/or neglect. Call (508)929-1000 and ask for intake and then state that you are a mandated reporter and need to file a 51-A. It is recommended that you complete the Report of Child(ren) Alleged to be Suffering from Serious Physical or Emotional Injury by Abuse or Neglect prior to calling as you will be asked to provide all of the information that is asked for on this form. When completing this form, all information must be provided including the name and contact information (provide school address and phone number) of the mandated reporter. You must also sign the form.
2. Once the oral report has been made, you have 48 hours in which to fax or mail the written Report of Child(ren) Alleged to be Suffering from Serious Physical or Emotional Injury by Abuse or Neglect. This can be faxed to (508)929-1100 or mailed to DCF South Central Area Office 185 Church Street Whitinsville, Massachusetts 01588.
3. Please keep your original Report of Child(ren) Alleged to be Suffering from Serious Physical or Emotional Injury by Abuse or Neglect for your records, give a copy to the building principal, School Adjustment Counselor, and send a copy via interoffice mail or by email to Lucy Jenkins, Director of Special Education (ljenkins@milfordma.com)

Report of Child(ren) Alleged to be Suffering from Serious Physical or Emotional Injury by Abuse or Neglect



Massachusetts law requires an individual who is a mandated reporter to immediately report any allegation of serious physical or emotional injury resulting from abuse or neglect to the Department of Children and Families by:

**STEP 1: Immediately reporting by oral communication to the area office nearest to you (see contact information at end of form); and
STEP 2: Completing and sending this written report to the appropriate Department of Children and Families office within 48 hours of making the oral report.**

For more information about requirements for mandated reporters and filing a report of alleged abuse and/or neglect please see **A Guide for Mandated Reporters** available on the DCF website at www.mass.gov/dcf.

Please complete all sections of this form. If some data is uncertain or unknown, please signify by placing a question mark ("?") after the entry.

CHILDREN REPORTED

Name	Current Location / Address	Sex	Age or Date of Birth
		<input type="checkbox"/> Male <input type="checkbox"/> Female	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	

PARENT OR GUARDIAN 1

Name			
First	Last	Middle	
Address			
Street & Number	City / Town	State	Zip Code
Phone #		Age/Date of Birth	

PARENT OR GUARDIAN 2

Name:			
First	Last	Middle	
Address:			
Street & Number	City / Town	State	Zip Code
Phone #:		Age/Date of Birth	

REPORTER / REPORT

Report Date:	<input type="checkbox"/> Mandatory Report	<input type="checkbox"/> Voluntary Report
Reporter's Name:		
First	Last	Middle
(If the reporter represents an institution, school or facility, please indicate)		
Reporter's Address:		
Street & Number	City / Town	State
Zip Code		
Phone #:		
Has reporter informed caretaker of report ? <input type="checkbox"/> Yes <input type="checkbox"/> No		

What is the nature and extent of injury, abuse, maltreatment, or neglect? Please include information on any prior evidence of same and other worries regarding danger to the child(ren). (Please cite the source of this information if not observed firsthand.)

What are the circumstances under which the reporter became aware of the injuries, abuse or maltreatment, or neglect? Pedikit# (if applicable):

What action has been taken thus far to treat, shelter, or otherwise assist the child(ren) to deal with the situation?

If report involved alleged domestic violence, please list any information that will help DCF make safe contact with the family (e.g., work schedule, place of employment, daily routines for the adult victim).

Please provide information that you think might be helpful in establishing the cause of the injury and / or the person(s) responsible for it. If known, please provide the name(s) of the alleged perpetrator(s).

Please provide any information about the family's strengths and protective capacities that you think will be helpful to DCF in ensuring the child's safety and supporting the family to address the abuse and/or neglect concerns.

Please give other information that you think might be helpful in establishing the cause of the injury and/or the person(s) responsible for it. If known, please provide the name(s) of the alleged perpetrator(s)?

Signature of Reporter: _____

To report child abuse and/or neglect: Weekdays from 9:00 am to 5:00 pm call the DCF Office nearest you from the list below.
Weekdays after 5:00 pm and 24 hours on weekends and holidays call the
Child-At-Risk-Hotline 1-800-792-5200

DCF AREA OFFICES

Western Region

Greenfield 413-775-5000
Holyoke 413-493-2600
Springfield 413-452-3200
Robert Van Wart Center 413-205-0500
East Springfield
Worcester, East & West 508-929-2000
Whitinsville 508-929-1000
Leominster 978-353-3600
Pittsfield 413-236-1800

Northern Region

Lowell 978-275-6800
Framingham 508-424-0100
Haverhill 978-469-8800
Lawrence 978-557-2500
Cambridge/Somerville 617-520-8700
Malden 781-388-7100
Cape Ann, Salem 978-825-3800
Lynn 781-477-1600

Southern Region

Arlington 781-641-8500
South Weymouth 781-794-4400
Cape Cod & Islands 508-760-0200
Plymouth 508-732-6200
Fall River 508-235-9800
New Bedford 508-910-1000
Brockton 508-894-3700
Taunton/Attleboro 508-821-7000

Boston Region

Dimock Street, Roxbury 617-989-2800
Hyde Park 617-363-5000
Harbor, Chelsea 617-660-3400
Park Street, Dorchester 617-822-4700