



Protection of Minors and Vulnerable Adults Policy Reporting Form

This form is to be used for all policy violations in accordance with RISD's Protection of Minors and Vulnerable Adults Policy *OR* any known or suspected case of neglect or abuse involving a minor or vulnerable adult enrolled and a caregiver in a RISD program.

**If this is a case of neglect or abuse,
a suspicion of neglect or abuse by a caregiver
and whether or not DCYF was contacted,
this form must be submitted to Public Safety*.**

To be completed by the person reporting the incident or suspected abuse:

Date: _____

Reporter's Name: _____ Department: _____

If you did not witness the incident, please indicated who reported the incident to you:

Date & time incident was reported to you: _____

Name of Subject: _____

Program in which Subject was enrolled: _____

Summary of the Incident:

Was DCYF contacted? _____ If YES, by whom? _____

Date & time of call: _____

RISD Contact Information:

Human Resources
Public Safety

401-454-6606
401-454-6376

humres@risd.edu
pubsafe@risd.edu

**Only in cases involving a RISD employee*