

Confidential Information

This form contains confidential information and is to be kept by the school administrator.

NOTICE OF INVESTIGATION

School:	Date:		Time:	
Name of Agency Represented:				
Division of Child and Family Services		Law Enforcement		
Individual requesting investigation:				
Name:	Positi	on:		
Phone:				
Student Investigating:				
Name:	Birtho	day:		
Age:	Grade	e:		
Please circle an answer to EACH question:				
Is the interview for the purpose of investigating of Do you want a school representative to sit with you			YES YES	NO NO
Is the interview for the purpose of criminal investories. If YES: Is the student a suspect? Is the student a witness? Is the student a victim? Is the interview to gain information.	YES YES YES	NO NO NO NO	YES	NO
Has the parent/guardian been notified of this inv	estigation?		YES	NO
Please be advised according to agency policy and proce responsibility to notify the parent/guardian regarding contact parent/guardian regarding the investigation.				
To be completed by the investigating represent	ative upon	completion of the inte	erview:	
The child will be placed in protective custody and scheduled for a shelter hearing. The child will remain at school and will be allowed to return home after school.			YES YES	NO NO
Investigation Representative Signature:				
School Representative Signature:				

 $\label{lem:Note: In the principal's absence an administrative substitute may administer guidelines and procedures. \\$