

ACKNOWLEDGMENT OF MANDATED REPORTER STATUS

I, _____, understand that when I am employed as a _____, I will become a mandated reporter under the Abused and Neglected Child Reporting Act (IL. Rev. Stat. 1985, ch. 23, pars. 2051 et seq.) This means that I am required to report or cause a report to be made to the child abuse Hotline number (1-800-25A-BUSE) whenever I have responsible cause to believe that a child known to me in my professional or official capacity may be abused or neglected. The oral report must be confirmed in writing to the appropriate Child Protective Service Unit within 48 hours. I understand that there is no charge when calling the Hotline number and that the Hotline operates 24-hours a day, 7 days per week, 365 days per year.

I understand that an "abused child" is one whose parent, or immediate family member, or other person responsible for the child's welfare, or any individual residing in the same home, or a paramour of the child's parent, inflicts upon or creates a substantial risk of physical or emotional injury to the child, commits a sex offense against the child, or commits torture or inflicts excessive corporal punishment upon the child. A "neglected child" is one whose parent or other person responsible for the child's welfare fails to provide the child with the necessary care and support, such as nourishment, medical care, education as required by law, clothing and shelter, or who is abandoned. A child may not be considered abused or neglected solely because a parent or guardian, in good faith, depends upon spiritual prayer alone for the treatment of disease.

When making a report to the DCFS, the following information is required, if known:

1. The name and address of the child and his or her parents or guardian.
2. The child's age, sex, and race.
3. The nature and extent of the abuse or neglect.
4. Any evidence of previous injuries.
5. The names of persons apparently responsible for the abuse or neglect.
6. The family's composition, including the names, ages, sexes, and races of other children.
7. The reporters name, occupation, and a place where he or she may be reached.
8. The actions taken by the reporter.
9. Any other information the reporter believes to be helpful.

I further understand that the privileged quality of communication between me and my patient or client is not grounds for failure to report suspected child abuse or neglect. I know that if I willfully fail to report suspected child abuse or neglect, I may be found guilty of a Class A misdemeanor.

I also understand that if I am subject to licensing under the Illinois Nursing Act, the Medical Practice Act, the Psychologist Registration Act, the Social Workers Registration Act, the Dental Practices Act, Article 21 of the Illinois School Code, or "AN ACT to regulate the practice of Podiatry," I may be subject to license suspension or revocation if I willfully fail to report suspected child abuse or neglect.

I affirm that I have read this statement and have knowledge and understanding of the reporting requirements which apply to me under the Abused and Neglected Child Reporting Act.

Signature of Applicant/Employee

Date