



**Diocese of Rockville Centre**  
**Department for the Protection of Children and**  
**Young People**  
**Incident Management and Reporting System**

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|---|---|
| <p>Name: _____<br/>Accused/Priest/Deacon/Religious</p> <p>Address/Parish: _____<br/>_____</p> | <p>Name: _____<br/>Victim</p> <p>Date of Birth: ___/___/___<br/>Gender <input type="checkbox"/> male <input type="checkbox"/> female</p> <p>Address _____<br/>_____</p> |
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| <p>Person Reporting _____<br/>Contact Telephone Number _____<br/>Date Reported ___/___/___<br/>Time Reported _____</p> | <p><u>Allegation of Sexual Abuse</u></p> <p><input type="checkbox"/> Sexual Abuse<br/><u>Sexual Assault</u><br/><input type="checkbox"/> Rape/Sodomy<br/><input type="checkbox"/> Other Sexual Assault _____</p> |
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| <p>Incident Date: ___/___/___<br/>Incident Time: _____ am/pm<br/>Location:</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Rectory</li><li><input type="checkbox"/> Church Property</li><li><input type="checkbox"/> Off grounds _____</li><li><input type="checkbox"/> Vehicle</li><li><input type="checkbox"/> Other/specify _____</li></ul> |
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| <p>Narrative Description: Description of Incident (Who? What? Where? Why? How?)<br/>Provide names of witnesses, etc. (if needed, use additional paper)</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> |
| <p>Signature/ Title: _____</p> <p>Date: ___/___/___</p> <p>Time: _____ am/pm</p>   |

**Follow-up:** To be completed by the Delegate/Pastoral Intervention Team  
 Specify Findings for Follow-up, Actions Taken, Recommendations, Interventions, Policy and Procedure changes.

Signature: \_\_\_\_\_  
 Delegate/Pastoral Intervention Team

Date: \_\_\_\_\_

Contributing Factors for Incident:

- Alcohol Use/Abuse
- Substance Abuse \_\_\_\_\_

Notifications:

|                             | Person Contacted | Date        | Person Making Contact |
|-----------------------------|------------------|-------------|-----------------------|
| Bishop's Office/Delegate    |                  | ___/___/___ |                       |
| Local Police Precinct _____ |                  | ___/___/___ |                       |
| George Rice, Esq./DA        |                  | ___/___/___ |                       |
| William Chapin              |                  | ___/___/___ |                       |

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