

Handle With Care Notice

Agency File Copy

Police Department Incident Number: _____

Childs Name(s) and Age(s): _____

Address: _____

School: _____

Relationship to individuals involved: _____

Present during the Incident: Yes No Report filed: Yes No

Charges Filed: Yes No

Case Number: _____

CPS Referral: Yes No

Follow-up or Referrals Made to Parent: Yes No

Agency Referrals: _____

Handle With Care Notice Sent to School: Yes No

School: _____

Additional Information:

Handle With Care Notice

To: (School)

From: (Law Enforcement Agency)

Date:

Time:

Incident Date:

Childs Name(s) and Age(s): _____



From: School Office

To: (Student's teachers)

