

**NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF SOCIAL SERVICES  
CHILD PROTECTIVE SERVICES REPORT  
REPORT TO CENTRAL REGISTRY/CPS APPLICATION**

Form # \_\_\_\_\_  
enter # assigned by system

1. County	2. Cty Case Number	3. Case Manager Name, Last	FI	MI	4. Case Manager Number
5. Date of Initial Report	6. Date Assessment Initiated	6a.DER	7. Date of Case Decision		8. Risk Assess Rating <input type="checkbox"/> L = Low <input type="checkbox"/> M = Medium    N = N/A <input type="checkbox"/> H = High
9. Request for Assistance					

10. Child ID	11. Child Name, Last	Child Name, First	MI	12. Social Security Number
13. Date of Birth	14. Sex	15. Race	16. Sch	17. Gr
18. Lv Ar	19. Special Areas		20. Source of Referral(s)	20a. NF <input type="checkbox"/>
			21. Juv <input type="checkbox"/>	22. Cri <input type="checkbox"/>
			23. Perp Rel	24. Post Svcs

25. Failure to Rpt Source	26. Failure to Report Reason (select all that apply)			
<input type="checkbox"/>	<input type="checkbox"/> Did not want to get involved/Family matters/Religious beliefs	<input type="checkbox"/>	<input type="checkbox"/> Thought DSS would not respond	<input type="checkbox"/> Fear of Retaliation/Financial distress
<input type="checkbox"/>	<input type="checkbox"/> Did not know how to report	<input type="checkbox"/>	<input type="checkbox"/> Thought someone else would report it/Better handled by other resource or service	
<input type="checkbox"/>	<input type="checkbox"/> Thought it would be a breach of confidentiality	<input type="checkbox"/>	<input type="checkbox"/> Did not consider actions inappropriate/Disbelief of possible allegations	<input type="checkbox"/> Other/Refused to say/Unknown

27. Contributory Factors-Order By Priority (number all that apply for caretaker, child and household separately)			28. Type Reported <input type="checkbox"/>		30. Type Found <input type="checkbox"/>		31. Findings Reason <input type="checkbox"/>																																																																																					
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41. Child Care Group Home/Institution									