

ACKNOWLEDGEMENT OF MANDATED REPORTER STATUS

I,	, understand that when I am employed as a	
,	(Employee Name)	
	report to be made to the child abuse Hotline number at 1-800-25-ABUSE (1-800-25) reasonable cause to believe that a child known to me in my professional or official neglected. I understand that there is no icharge on the us packing all independent of the child abuse on unappear to the child abuse of the child abuse of the child abuse of the child abuse Hotling all independent of the child abuse Hotline number at 1-800-25-ABUSE (1-800-25).	l ca
	I affirm that I have read this statement and have knowledge and understanding of which apply to me under the Abused and Neglected Child Reporting Act.	the
	Cionatura of Analicant/Employee	
	Signature of Applicant/Employee	
CANTS 22	Date	

Office of the Director 406 E. Monroe Street • Springfield, Illinois 62701 www.DCFS.illinois.gov

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