## Reporting Form CPS calls

1,	, made a report to CPS on		at .
		(Date)	(Time)
I am an employee/volunte	eer at(Name of entity)		_, an entity in
	(Name of entity)		
the Diocese of Dallas.			
The CPS person who took	my call was	TOTAL	<u></u>
The case number given to	the call was		
The call concerned (name incident).	of child and circumstances; date	and place of	alleged
<u></u>	·		
		-	
1			
		,	
Signed			
Employee/Volunt	eer who made the call	VIIIE.II	
Signod	•		
Safety Officer			
The safety officer will keep The safety officer will send	this form to CPS confirming the continuing the continuity of this form on file. If a copy of this form to the Chanced within three working days of the	ellor.	ne call.
Mailing address of CPS:	Texas Department of Family and 2355 North Stemmons Freeway Dallas, TX 75207 <b>1-800-252-5400</b>	Protective S	ervices