# [INSERT NAME OF INSTITUTION]

# Sex Discrimination, Sexual Misconduct & Sexual Harassment Incident Report

If this is an emergency, call 911.

Prefer to submit your Incident Report online? Submit an Incident Report online at: [INSERT HYPERLINK]

[NAME OF INSTITUTION] encourages individuals with knowledge or concerns of an incident of sex discrimination, sexual misconduct, or sexual harassment to report the incident to our Title IX Coordinator.

In accordance with the [INSTITUTION POLICY] any person may report an incident(s) of sex discrimination, sexual misconduct, or sexual harassment to the Title IX Coordinator. The reporting party may be the person directly affected by the alleged incident or a third party. Detailed information about filing this report can be found in the section titled “[What Do I Need to Know About Filing an Incident Report](#_what_do_i)” in this document.

The Title IX Coordinator’s contact information is as follows:

[TITLE IX COORDINATOR NAME]

[TITLE IX COORDINATOR JOB TITLE]

[TITLE IX COORDINATOR ADDRESS]

Phone: [TITLE IX COORDINATOR PHONE]

Email: [TITLE IX COORDINATOR EMAIL]

In this form you will see the following terms:

Complainant: An individual who is alleged to be the victim of conduct that could constitute sexual harassment.

Respondent: An individual who has been reported to be the perpetrator of conduct that could constitute sexual harassment or sexual misconduct.

**Anonymous reporting:** [NAME OF INSTITUTION] accepts anonymous reports, which will be reviewed by the Title IX Coordinator and included in campus safety assessments. However, [NAME OF INSTITUTION]’s ability to respond to anonymous reports is significantly limited. More information about anonymous reporting can be found in ““[What Do I Need to Know About Filing an Incident Report](#_what_do_i).”

Once you have completed this report, please submit via email, mail, or deliver (or have a friend deliver if you wish to remain anonymous) to the office of the Title IX Coordinator.

Thank you for reaching out with this important information. You can find additional resources about [NAME OF INSTITUTION]’s policies and protocols regarding incidents of sex discrimination, sexual misconduct, and sexual harassment on our [website](https://bethanyseminary.edu/title-ix-information/).

## **REPORTING PARTY & INCIDENT information**

**Please provide your contact information and general information about the incident(s).**

|  |  |
| --- | --- |
| Your Name: |  |
| [NAME OF INSTITUTION] ID #: |  |
| Email Address: |  |
| Phone Number: |  |
| Nature of Report: | [ ] Report against [NAME OF INSTITUTION] employee [ ]  Report against [NAME OF INSTITUTION] Student[ ]  Report against [NAME OF INSTITUTION] Community Member[ ] Report against Non-[NAME OF INSTITUTION] Community Member [ ]  Unknown |
| Date of Incident: |  |
| Time of Incident: |  |
| Location of Incident: |  |
| To your knowledge has this incident been reported to the local Police Department? | **[ ]** Yes [ ]  No [ ]  Do Not Know |

## **involved parties**

Please complete the following information to the best of your knowledge.

Upon receipt of this incident report, the Title IX Coordinator will contact the complainant (if identified) to offer supportive measures, provide information about additional resources, and explain how to file a formal complaint.

If you are the reporting party and complainant, you do not need to complete the fields already completed in the “Reporting Party & Incident Information” Section.

### **Complainant information**

|  |  |
| --- | --- |
| Name: |  |
| [NAME OF INSTITUTION] ID #: |  |
| Email Address: |  |
| Phone Number: |  |
| Status at [NAME OF INSTITUTION]: | [ ]  Student [ ]  Faculty Member [ ]  Staff Member[ ]  Non-Community Member [ ]  Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Gender: | [ ]  Male [ ]  Female [ ]  Gender Non-Conforming[ ]  Organization [ ]  Other (specify if desired) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

### **Respondent information**

|  |  |
| --- | --- |
| Name: |  |
| [NAME OF INSTITUTION] ID #: |  |
| Email Address: |  |
| Phone Number: |  |
| Status at [NAME OF INSTITUTION]: | [ ]  Student [ ]  Faculty Member [ ]  Staff Member[ ]  Non-Community Member [ ]  Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Gender: | [ ]  Male [ ]  Female [ ]  Gender Non-Conforming[ ]  Organization [ ]  Other (specify if desired) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

## **DESCRIPTION OF THE INCIDENT**

Please describe the incident. Include all relevant details and include the names and descriptions of the involved parties (complainant, respondent, and witnesses), if possible. If you need more space to describe the incident, you may attach an additional document to this report. (*required)*

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## **witness information**

If known, please provide the name and contact information of potential witnesses. Additional space for witness information is provided on the last page of this document.

|  |  |
| --- | --- |
| Name: |  |
| [NAME OF INSTITUTION] ID #: |  |
| Email Address: |  |
| Phone Number: |  |
| Status at [NAME OF INSTITUTION]: | [ ]  Student [ ]  Faculty Member [ ]  Staff Member[ ]  Non-Community Member [ ]  Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Gender: | [ ]  Male [ ]  Female [ ]  Gender Non-Conforming[ ]  Organization [ ]  Other (specify if desired) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

## **additional information**

Please provide any additional information that you would like the Title IX Coordinator to know such as your reason for reporting this incident, immediate security concerns, or questions about next steps.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## **relevant documents or photos**

Please attach to this report any documents or photos that may help the Title IX Coordinator better understand the incident.

# what do i need to know about filing an incident report?

[NAME OF INSTITUTION] is committed to the principles of equal opportunity and seeks to establish and maintain an environment which ensures equal access to education for all [NAME OF INSTITUTION] community members including students, applicants for admission, employees, applicants for employment, guests, and visitors. To foster this environment, [NAME OF INSTITUTION] encourages individuals with knowledge or concerns of an incident of sex discrimination, sexual misconduct, or sexual harassment to report the incident to our Title IX Coordinator.

In accordance with the [NAME & HYPERLINK OF INSTITUTION POLICY], any person may report an incident(s) of sex discrimination, sexual misconduct, or sexual harassment to the Title IX Coordinator. Forms of sexual harassment include sexual assault, dating violence, domestic violence, and stalking. The reporting party may be the person directly affected by the alleged incident (referred to as “complainant”) or a third party.

For more information about prohibited forms of conduct at [NAME OF INSTITUTION], supportive measures, and [NAME OF INSTITUTION]’s response to incidents, refer to the [NAME & HYPERLINK OF INSTITUTION POLICY]. You may find additional resources on [NAME OF INSTITUTION]’s website.

Reports of sex discrimination, sexual misconduct, and sexual harassment may be written or verbal and may be made at any time (including non-business hours) in person, or by using the telephone number or email address, or by mail to the office address of the Title IX Coordinator. Individuals may also submit this Incident Report by email, mail, or in person directly to the Title IX Coordinator or complete an online Incident Report at: [INSERT HYPERLINK].

The Title IX Coordinator’s contact information is as follows:

[TITLE IX COORDINATOR NAME]

[TITLE IX COORDINATOR JOB TITLE]

[TITLE IX COORDINATOR ADDRESS]

Phone: [TITLE IX COORDINATOR PHONE]

Email: [TITLE IX COORDINATOR EMAIL]

## **what happens after i complete the incident report?**

Once you have completed this report, please email, mail, or deliver (or have a friend deliver if you wish to remain anonymous) to the Title IX Coordinator.

After submitting this incident report form, the Title IX Coordinator will contact the complainant to discuss supportive measures and explain how to file a formal complaint and/or initiate the complaint resolution procedures, if applicable and desired by the complainant. Supportive measures will be available to complainants regardless of whether or not they wish to file a formal complaint to initiate a grievance process or complaint to initiate [NAME OF INSTITUTION] complaint resolution procedures.

See the [NAME OF INSTITUTION POLICY] for more information about [NAME OF INSTITUTION]’s complaint resolution procedures as well as the Title IX formal complaint and grievance process.

You or the complainant may also contact Counseling Services, if desired. [PROVIDE INFORMATION/HYPERLINK FOR COUNSELING SERVICES]

**IF APPLICALBE: Anonymous reporting:** [NAME OF INSTITUTION] accepts anonymous reports, which will be reviewed by the Title IX Coordinator and included in campus safety assessments. If an anonymous report is submitted by a third-party and contains the identity of the complainant, the Title IX Coordinator will contact the complainant to inquire about the incident, offer supportive measures, and explain the process for filing a formal complaint. If an anonymous report does not contain the identity of the complainant, [NAME OF INSTITUTION] will be unable to contact the complainant and offer supportive measures. While the Title IX Coordinator will keep confidential the identity of the complainant (unless disclosing the complainant’s identity is necessary to provide supportive measures such as no-contact orders), the Title IX Coordinator must know the identity of the complainant to offer supportive measures.

###### Incident Report versus Formal Complaint

This Incident Report provides community members with the opportunity to notify the Title IX Coordinator of prohibited conduct. However, this report form is not a formal complaint and does not initiate the grievance processes outlined in the [NAME OF INSTITUTION POLICY] or other the complaint resolution procedures outlined in [NAME OF INSTITUTION]’s Student and Employee Handbooks. Individuals who wish to initiate an investigation into an incident may file a formal complaint with the Title IX Coordinator and/or discuss this option when contacted by the Title IX Coordinator.

As this is not a formal complaint, generally the respondent will not be contacted without the consent of the complainant. However, should [NAME OF INSTITUTION] undertake an individualized safety and risk analysis and determine that the respondent poses an immediate threat to the physical health or safety of any student or other individual based on the allegations contained in this report, [NAME OF INSTITUTION] may remove the party from campus.

The respondent may be contacted in the event that the complainant requests specific supportive measures (i.e. no-contact orders) and will be contacted if a formal grievance or complaint resolution process is initiated.

**Confidentiality:** [NAME OF INSTITUTION] will keep confidential the identity of any individual who reports sex discrimination, sexual misconduct, and/or sexual harassment. [NAME OF INSTITUTION] will also keep confidential the identity of any complainant (if not the reporting party), any individual who has been reported to be the perpetrator of sex discrimination, any respondent, and any witness, except as may be permitted by the FERPA statute or regulations, 20 U.S.C. 1232g and 34 CFR part 99, or required by law, or to carry out the purposes of 34 CFR part 106, including implementing supportive measures and the conduct of any investigation, hearing, or judicial proceeding arising thereunder.

# Confidential Resources, Medical Services, Counseling Services

### **Confidential Resources**

[INSERT CAMPUS BASED CONFIDENTIAL RESOURCES]

Rape Abuse and Incest National Network (RAINN)

1-800-656-HOPE

[www.rainn.org](http://www.rainn.org)

The RAINN hotline offers free, confidential counseling and support 24 hours a day, from anywhere in the country.

National Resource Center on Domestic Violence Hotline (24 hours)

800-799-SAFE

### **On-Campus Resources**

[INSERT ON-CAMPUS RESOURCES: COUNSELING, HOTLINES ETC.]

### **Community Resources**

[INSERT LOCAL RESOURCES: POLICE, CRISIS CENTERS ETC.]

## additional witness information

### **witness two**

|  |  |
| --- | --- |
| Name: |  |
| [NAME OF INSTITUTION] ID #: |  |
| Email Address: |  |
| Phone Number: |  |
| Status at [NAME OF INSTITUTION]: | [ ]  Student [ ]  Faculty Member [ ]  Staff Member[ ]  Non-Community Member [ ]  Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Gender: | [ ]  Male [ ]  Female [ ]  Gender Non-Conforming[ ]  Organization [ ]  Other (specify if desired) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

### **witness three**

|  |  |
| --- | --- |
| Name: |  |
| [NAME OF INSTITUTION] ID #: |  |
| Email Address: |  |
| Phone Number: |  |
| Status at [NAME OF INSTITUTION]: | [ ]  Student [ ]  Faculty Member [ ]  Staff Member[ ]  Non-Community Member [ ]  Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Gender: | [ ]  Male [ ]  Female [ ]  Gender Non-Conforming[ ]  Organization [ ]  Other (specify if desired) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |