

Sexual Misconduct Report Form

Sexual Misconduct includes: Sexual Violence, Stalking, Dating and Domestic Violence, and Gender-Based Harassment

Please indicate whether this is an Anonymous or Formal Report:

Anonymous Report: Any individual (*excluding a Campus Security Authority (CSA)/Responsible Employee) may make an anonymous report concerning an act of sexual misconduct. An individual may report the incident without disclosing his/her name, identifying the respondent, or requesting any action. However, the college's ability to respond to an anonymous report may be limited depending on the information about the incident or the individuals involved.

***Campus Security Authorities/Responsible Employees are not permitted to report anonymously. A CSA/Responsible Employee must complete a Formal Report.**

Please return your Anonymous Report in a sealed envelope to the Director of Campus Safety, Department of Campus Safety, James House, 541 Main Street, New London, NH 03257. All reports will go to the Title IX coordinator.

Formal Report: This report will initiate a Title IX investigation; however, the Complainant may choose at any time not to participate in the process. Before using this form to report an incident/assault discussed with you, inform the individual of your obligation to complete this form and offer to complete the form together.

As an institution, we aim to determine the details of these types of incidents so that we may direct people to the appropriate resources and help wherever possible. We also hope that a greater understanding of what happens on campus will benefit our community as we try to design and implement future educational and intervention efforts.

Please return your Formal Report in a sealed envelope to the Title IX Coordinator or a Deputy Coordinator.

1. Are you reporting an incident/assault that happened to you or an incident/assault discussed with you?

- Incident/assault happened to me (Please skip to question 4)
- Incident/assault was discussed with me by the Complainant
- Incident/assault was discussed with me by a friend of the Complainant

2. Reporter(**Formal Report ONLY**): _____ Phone: _____

3. When did the Complainant first discuss the incident/assault with you?

4. Did the incident occur while the Complainant was enrolled at Colby-Sawyer?

- Yes
- No

5. Complainant's Sex _____ Gender Expression _____ Race _____

Age _____ Year in School _____

6. Complainant's Residence: _____

- Residence Hall College House Off Campus

7. Location of incident/assault

On-Campus (check appropriate response below)

- Residence Hall CSC Owned or Controlled Property (not a residence hall) Off-Campus

8. Describe the location of the incident/assault (name of building, street, etc.):

9. Time and Date of incident/assault: _____

10. Was the incident/assault associated with an organized event (campus-sponsored or not)?

- No Yes, Please specify: _____

11. Describe the incident/assault (check all that applies):

- Sexual Harassment
 Fondling
 Incest
 Statutory Rape
 Rape (oral, anal, or vaginal penetration by penis or other object) without consent
 Exposure of the accused genitals without consent
 Dating Violence
 Domestic Violence
 Stalking
 Other (please describe) _____

12. Was either party under the influence of alcohol or other drugs at the time of the incident/assault?

Complainant: Alcohol? Yes No Unsure Other Drugs? Yes No Unsure

Accused: Alcohol? Yes No Unsure Other Drugs? Yes No Unsure

13. Describe the pressure or force used by the accused (Check all that apply):

- Verbal pressure or arguments
 Position of authority (supervisor, professor, college administrator, etc.)
 Threat of physical force (with or without a weapon)
 Use of physical force (hit, held down, etc.)
 Gave the Complainant alcohol or drugs, resulting in significant incapacitation

- Complainant was unconscious or blacked out during the incident/assault
- Complainant suspects that "date rape drugs" were involved in the incident/assault
- Other (please describe) _____

14. Was a weapon used in the incident/assault?

- No
- Yes, type: _____

15. Number of those who are accused: _____ Description of accused:

16. Status of accused:

- Student
- Faculty
- Staff
- No campus role
- Unknown

17. Describe the nature of the relationship of the accused to the Complainant before the incident/assault:

- Stranger
- Spontaneous date (i.e. met at bar or party)
- Planned first date
- Romantic acquaintance/on-going relationship
- Friend or nonromantic acquaintance
- Relative
- Other (describe) _____

18. Other departments at Colby-Sawyer the Complainant has reported this incident/assault to or discussed it with:

19. Other individuals at Colby-Sawyer the Complainant has talked with about this incident

- Friend
- AC/RA
- Faculty member
- Staff member
- Other _ _____

20. Did you refer the Complainant to other resources on or off campus?

- No
- Yes, (describe) _____

21. Does the Complainant want to be contacted by a Campus Counselor? _____

22. Name of Complainant(**Formal Report ONLY**) _____

23. How to contact Complainant(**Formal Report ONLY**) _____

FILING YOUR REPORT

Anonymous Report: Please return your report in a sealed envelope to the Director of Campus Safety, Department of Campus Safety, James House, 541 Main Street, New London, NH 03257

Formal Report Please return the report in a sealed envelope to the Title IX Coordinator, Robin Davis or Deputy Coordinators, Amanda Moak (students), Eden Wales (faculty) or Heather Zahn (staff).

Campus Confidential Resources include:

For Students:

- **On-Campus: Baird Health & Counseling Center during regular business/office hours (9 AM-3 PM)** - (603) 526-3621
- **Riverbend Counselors (after regular business/office hours)** – 1-844-743-5748 or by contacting Campus Safety at (603)526-3300
- **Off-Campus: Crisis Center of Central New Hampshire** - (603) 225-7376

The CCNH provides confidential crisis support 24 hours a day relating to rape, sexual assault, or dating and domestic violence via its 24-Hour Crisis Line: (866) 841-6229

- **Off-Campus: New London Hospital** – (603) 526-2911 located at 273 County Rd., New London, NH 03257; New London Hospital provides 24-hour emergency care a mile and a half from campus.

For Employees:

- **Employee Assistance Plan** - (888) 209-7840
- **Crisis Center of Central New Hampshire** - (603)225-7376

Sex-based Discrimination and Sex-based Harassment Policy: For more information on Colby-Sawyer policies, procedures, and resources related to incidents of sexual misconduct, please visit:

https://www.csctitleix.com/files/ugd/4293dd_626ee7d7259b4a22998c701da87b69ec.pdf