

# Sexual Misconduct Report Form

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

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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. Depending on the level of information available about the incident or the individuals involved, however, the college's ability to respond to an anonymous report may be limited.

\*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 that has been discussed with you, inform the individual of your obligation to complete this form and offer to complete the form together.

As an institution, it is our goal to determine the details of these types of incidents so that we may direct people to the appropriate resources and offer assistance wherever possible. In addition, we hope that having 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.**

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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 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     Cottage Lane Duplex     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 location of 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  
 Sexual Contact (fondling, kissing, petting, but not penetration) without consent  
 Attempted intercourse without consent (penetration did not occur)  
 Intercourse (oral, anal, or vaginal penetration by penis or other object) without consent  
 Exposure of the accused genitals without consent  
 Dating/Domestic Violence  
 Stalking  
 Other (please describe) \_\_\_\_\_
12. Was either party under in 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 a accused (Check all that apply):  
 Verbal pressure or arguments  
 Position of authority (supervisor, professor, college administrator, etc.)  
 Threat of physical force (with or without 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 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 prior to 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, Mary McLaughlin (students), Laura Alexander (faculty) or Heather Zahn (staff).

## **Confidential Resources and Support**

### **On-Campus:**

#### **Baird Health and Counseling Center**

(603) 526-3621

Counselors are available during regular office hours. Counselors are also available on call after hours and can be reached through the Campus Safety Emergency Line.

### **For Employees:**

#### **Employee Assistance Plan**

(800) 828-6025

### **Off Campus**

#### **Crisis Center of Central New Hampshire**

(603)225-7376

The CCNH provides confidential crisis counseling 24 hours a day relating to rape or sexual assault via its 24-Hour Crisis Line: (800) 227-5570

**Title IX/Sexual Misconduct Policy:** For more information on Colby-Sawyer policies, procedures and resources related to incidents sexual misconduct, please visit: <http://colby-sawyer.edu/assets/citizenship/sexual-misconduct-policy.pdf>