

Sexual Misconduct Report Form

Sexual Misconduct includes: assault, rape, and all other forms of sexual violence

Before using this form to report an incident/assault that has been discussed with you, inform the individual of your intention to complete this form and offer to complete the form together. Information contained on this form is intended to be kept confidential; however exceptions may be made in the case of an ongoing threat to the community that the University is obligated to address. All efforts will be made to protect the student's anonymity; no information should be included which might identify the individual, unless requested by the victim/survivor.

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 us as we try to design and implement future educational and intervention efforts.

Please return this form in a sealed envelope to the **Student Victim Advocate**, Department of Public Safety.

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 Victim/Survivor

Incident/assault was discussed with me by a friend of the Victim/Survivor

2. Reporter: _____ Phone: _____

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

4. Did incident occur while the Victim/Survivor was enrolled at Pacific? Yes No

5. Victim/Survivor/s Gender: Race _____ Age _____ Year in School _____

6. Victim/Survivor's Residence: _____

Residence Hall Greek House Off-Campus Apt. Campus Apt. In-town res.

7. Location of incident/assault

On Campus (check appropriate response below)

Residence Hall Greek House Other Campus Building Outdoors Automobile

Other please describe _____

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):

Exposure of the assailant's genitals without consent

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

Other (please describe) _____

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

Victim/Survivor: Alcohol? yes no unsure

Other drugs? yes no unsure

Assailant(s): Alcohol? yes no unsure

Other drugs? yes no unsure

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

Verbal pressure or arguments

Position of authority (boss teacher, supervisor, etc)

Threat of physical force (with or without weapon)

Use of physical force (hit, held down, etc.)

Gave the Victim/Survivor alcohol or drugs resulting in significant incapacitation

Victim/survivor was unconscious or blacked out during incident/assault

Victim/survivor suspects that "date rape drugs" were involved in the incident/assault

Other (please describe) _____

14. Was a weapon used in the incident/assault? Yes No Type: _____

15. Number of assailants: _____

Description of assailant(s) _____

16. Status of assailant(s):

Student

Faculty

Staff

No campus role

Unknown

17. Describe the nature of the relationship of the assailant(s) to the Victim/Survivor 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 Pacific the Victim/Survivor has reported this incident/assault to or discussed it with: _____

19. Other individuals at Pacific the Victim/Survivor has talked with about this incident:

- Friend RA Faculty member Staff member Other _____

20. Did you refer the Victim/Survivor to other resources on or off campus? Yes No

Describe _____

21. Does the Victim/Survivor want to be contacted by a Campus Counselor or Student Victim Advocate? _____

22. Name of Victim/Survivor (**only if they wish to disclose it**) _____

23. How to contact Victim/Survivor (**only if they wish contact**) _____

Please return this form in a sealed envelope marked:

CONFIDENTIAL Victim Advocate Department of Public Safety
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Pacific has confidential resources available:

Counseling Center 209.946.2225

Student Victim Advocate 209.403.0250

Off-Campus confidential resource: Women's Center of San Joaquin County 209.465.4997

The Women's Center of San Joaquin County, which serves males as well as females, has a 24-hour rape crisis advocate who can offer assistance.

Tiger Lore: For more information on University of the Pacific policies, procedures and resources related to incidents sexual misconduct, please visit: <http://web.pacific.edu/x5149.xml>