

Paris Community Unit School District No. 4

Title IX Reporting Form

Please use this form to report an incident of sexual discrimination/harassment you have experienced, witnessed, or have had reported to you. Completion of this form does not constitute an open investigation. Once this form is completed and has been received, an initial assessment will be conducted to determine if the report rises to a level that warrants further investigation.

Reporter Information

Name: _____

Phone Number: _____

Email Address: _____

Nature of the Report: (Check all that apply.)

Sexual Harassment

Sexual Violence

Dating Violence

Other: _____

Role of Involved Parties:

Students Only

Employee Only

Student and Employee

Date of Alleged Incident: _____

Time of Incident: _____

Location of Alleged Incident: _____

Involved Parties

Please list information for anyone involved in this incident, including witnesses.

Name #1: _____

Gender:

- Male
- Female

Role:

- Victim
- Witness
- Alleged Preparator

Name #2: _____

Gender:

- Male
- Female

Role:

- Victim
- Witness
- Alleged Preparator

Name #3: _____

Gender:

- Male
- Female

Role:

- Victim
- Witness
- Alleged Preparator

Name #4: _____

Gender:

- Male
- Female

Role:

- Victim
- Witness
- Alleged Preparator

Name #5: _____

Gender:

- Male
- Female

Role:

- Victim
- Witness
- Alleged Preparator

What is your association with this incident?

- It happened to me.
- I observed the incident.
- I am a student and I have information about the incident.
- I am an employee and I have information about the incident.
- I have information about the incident but I am not a student or employee
- Other: _____

Statement on the Incident

Please provide a detailed description of the alleged incident using specific concise, objective language (who, what, where, when, why, and how). Be as specific as possible.

What happened? _____

Who was involved? _____

Where did it happen? _____

Have you talked to others about what happened? If yes, who and when? _____

Did you write down what happened? (diary, video, notes, blog, etc.) _____

Have you posted or seen anything posted on social media about this incident? _____

Do you have any reason to believe this incident represents an immediate threat of harm or danger to the individual or other members of school?

No

Yes: Please explain: _____

Have you reported this incident to anyone else?

No

Yes. If yes, to whom did you report it? _____

Do you have any supporting evidence (photos, videos, emails, text messages, etc.)?

No

Yes. If yes please explain. _____

Date Form Completed: _____

Signature of Person Completing the Form: _____

Supportive Measures Offered

The following supportive measures were offered:

- Counseling
- Extensions of deadlines or other course related adjustments
- Modifications of work or class schedule
- Campus escort services
- Mutual restrictions on contact between the parties
- Leave of absence
- Increased security and monitoring of certain areas
- Other: _____

Explain support measures taken: _____
