

# SEXUAL MISCONDUCT REPORT FORM

## **What is sexual misconduct?**

Sexual misconduct includes: rape, sexual assault, sexual coercion, sexual harassment, domestic and dating violence, stalking, and all other forms of sexual violence.

## **Who is required to report sexual misconduct?**

Except as described below, any University employee, whether faculty or staff, who receives a complaint or otherwise learns about a possible incident of sexual misconduct involving a member of the Boston University community as complainant or alleged perpetrator **must** complete this report form. Employees responsible for completing the report include student employees whose duties include supervision or teaching of other students (e.g., Resident Assistants, Teaching Assistants, Teaching Fellows, etc.).

You may also use this form to report an incident of sexual misconduct if you are the complainant or if you are not a Boston University employee.

## **Are there University employees who may keep reports of sexual misconduct confidential?**

An employee who becomes aware of a complaint of sexual misconduct while acting in his or her capacity as a member of the clergy, a therapist, a physician, or the University Ombuds may keep reports of sexual misconduct confidential pursuant to the employee's professional and legal obligations, **unless** the complainant requests that the employee report the complaint.

## **What if a complainant requests confidentiality?**

Even if a complainant requests confidentiality or is unwilling to proceed with a complaint, Boston University employees are required to report the complaint to the Title IX Coordinator. If confidentiality is requested, the University will take reasonable steps to investigate and respond to the complaint, consistent with the complainant's request. In all cases the University will weigh its responsibility to provide a safe and nondiscriminatory environment against the complainant's request for confidentiality. The determination of whether and how to proceed will be made by the appropriate University official in consultation with the complainant.

## **What resources are available to complainants?**

The University's Sexual Misconduct Resource Pamphlet, available electronically at [http://www.bu.edu/safety/files/2013/10/DOS-Sexual-Misconduct-Brochure\\_Final.pdf](http://www.bu.edu/safety/files/2013/10/DOS-Sexual-Misconduct-Brochure_Final.pdf), describes resources available to a complainant. In cases involving sexual violence, the complainant may also wish to contact the Sexual Assault Response and Prevention Center. The complainant also has a right to file both an internal complaint and a criminal complaint.

## **What happens with the information I provide?**

This report will be submitted to the University's Title IX Coordinator, Kim Randall, who will forward it to the proper office for appropriate action. Please contact her at (617) 353-9286 or [krandall@bu.edu](mailto:krandall@bu.edu) if you have any questions.

## **What should I do with the completed report form?**

Please provide the information requested on the other side and deliver the completed form to:

**Kim Randall  
Title IX Coordinator  
19 Deerfield Street  
Boston, MA 02115**

**\*This form can also be submitted by Secure Mail to [krandall@bu.edu](mailto:krandall@bu.edu)\***

**SEXUAL MISCONDUCT REPORT FORM**

| <b>COMPLAINANT'S INFORMATION (if different from reporter):</b>   |   |
|--|---|
| <b>Complainant's Name:</b>   | <b>Complainant's Affiliation to BU (student, faculty, staff, unaffiliated):</b> |
| <b>Complainant's Contact Information (if available):</b>   |   |
| <u>Telephone:</u>  | <u>Email:</u>   |
| <b>OFFENDER(S) INFORMATION:</b>  |   |
| <b>Offender's Name (if known):</b>   | <b>Offender's Affiliation to BU (student, faculty, staff, unaffiliated):</b>    |
| <b>INCIDENT INFORMATION:</b>   |   |
| <b>Date and Time of Incident:</b>  | <b>Location of Incident:</b>  |
| <b>Brief Description of Incident (nature of misconduct, context or circumstances, such as spring break trip, on campus event, off campus party, etc.):</b> |   |
| <b>REPORTER'S INFORMATION (required):</b>  |   |
| <b>Reporter's Name:</b>  | <b>Date of Report:</b>  |
| <b>Reporter's Affiliation to BU (student, faculty, staff, unaffiliated):</b>   | <b>Reporter's Contact Information:</b>  |
|  | <u>Telephone:</u>   |
|  | <u>Email:</u>   |