

HOW TO COMPLETE THE TITLE IX REPORT FORM

NAVIGATION

As you fill out this form, you can use the left and right arrows at the bottom to

EMERGENCY!!

If this is an emergency do not complete the Title IX report form. Call 911 and notify your supervisor, then call the Title IX Coordinator at 813 974 8616 and make a verbal report. We will have you complete the report form once the emergency has passed.

URGENT v. LOW

Urgent is for reports in which the complainant could be harmed again. For example, a student in a violent relationship or a student experiencing stalking. Low risk is for incidents that have passed but there's still concern for the complainant. For example, a sexual assault that occurred over the weekend.

PAGE 2 – YOUR INFORMATION

Your information (person filling out this form)

Your phone number:

Your email address:

Department / title / relationship:

Campus:

DEPARTMENT / TITLE / ROLE

Please don't just put "faculty." Faculty where? Which department? Similarly, don't just put "Assistant Director". We need to know what department you oversee.

their behalf, and we do not notify anyone outside the Title IX Office, such as the Respondent (accused), their parents, boss, professors, or the police.

SAFETY

If they say it's not safe to contact them via email or their parents or someone else has access to their email, ask them if it's safe to contact them via phone. If they say email and phone are not safe, let them know you still need to put their name on the form, but you will note on the form that neither email or phone is safe, and the Title IX Coordinator will establish an alternative way to provide resources to them.

EMAIL ADDRESS

If you do not have their USF email address but have another account (such as a Gmail account) you can contact the Title IX Coordinator at Adrian@usf.edu

SAFETY

In incidents of relationship and domestic violence, the offender often monitors the communication of the victim as a means to control them. This question helps us determine a safe way to contact the complainant.

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Page 5 – STATUS OF DISCLOSURE

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AFFILIATION

PAGE 6 – VICTIM INFORMATION

If this is a first person report, you would have provided this information on page 3 and chosen YES on page 5. You will only see this page if this is a third party report and chose NO on page 5.

NAME

You do have to provide the victim's name if you have it. They cannot remain anonymous. If they request to be anonymous, explain that we need their name but only for the purpose of sending an email with resources. We do not start any process on their behalf, and we do not notify anyone outside the Title IX Office, such as the Respondent (accused), their parents, boss, professors, or the police.

SAFETY

If they say it's not safe to contact them via email or their parents or someone has access to their email, ask them if it's safe to contact them via phone. If they say email and phone are not safe, let them know you still need to put their name on the

MISSING INFO

If you don't have the victim's U number, phone, email, etc. – that's okay. Put "unknown" but please don't leave any questions blank.

AFFILIATION

Please tell us how of if the victim is affiliated with USF on the status drop down. If they are not affiliated, you still need to submit this form.

MULTIPLE COMPLAINANTS

If they were the only victim, choose YES on the last questions. If there were other victims (even if you do not have information for those victims) click NO. This will generate an extra page where you can provide any information you may have about additional complainants. If you choose YES (this was the only victim) you may skip to PAGE B instructions.

PAGE 7 – INFO FOR ADDITIONAL VICTIMS

If there is more than one complainant, please enter the names, contact info and U numbers of additional victims.

PAGE 8 – RESPONDING PARTY

Phone number:

Email (US):

U number:

On this page you can provide any information about the Respondent (accused). If you do not have any information about the Respondent that is okay, enter "unknown" or N/A, but please don't leave any questions blank.

PAGE 9 – BRIEF DESCRIPTION

Please provide a brief description of the incident. Title of incident and date it was discovered.

expand(s)

Please type description here (box)

Please provide a brief summary explaining how you came to receive the disclosure and what was disclosed to you.

EXAMPLES

1. *The student approached me after class and disclosed they had been assaulted over spring break and the next assignment was triggering them. They requested an accommodation of an alternative assignment. I provided the accommodation.*
2. *The employee emailed me to notify me they could not come to work today because they recently separated from their abusive spouse and their spouse is now on campus attempting to find them.*

LOCATION

For location (if known) click on the corresponding location type. Then, in the space below, type the exact location (if known). For example, if the incident occurred in the Magnolia Hall, you would choose **ON CAMPUS RESIDENTIAL** and underneath type "Magnolia Hall". If the incident occurred on campus but it was not a residential building, such as the Library or a classroom, choose **ON CAMPUS NONRESIDENTIAL**

DATE

For the date of the incident, put the exact date if you have it. If you are only provided with an approximation, such as Spring Break or last semester, you can put that.

TIME

It is unlikely you will know the exact time of an incident, but if you do, include it. If you do not, but the complainant says it occurred in the evening or afternoon, you can put that. Otherwise, put "unknown".

PAGE 10 – RESPONSIBLE EMPLOYEE NOTIFICATION

RESOURCES

Please make sure to always provide resources to the discloser. In this area you can let us know which resources you provided. If you were unable to provide resources that's okay, just let us know why. For example, you might write *Third party report, no access to victim.*

OTHER ACTIONS

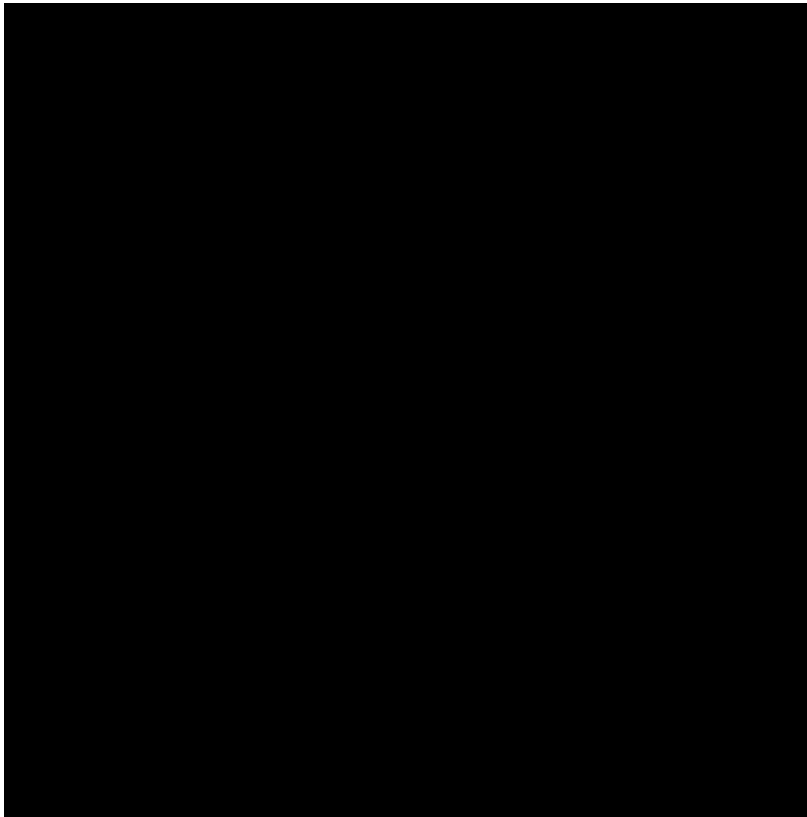
In this section, please let us know all other actions you took in response to this disclosure. For example, if you submitted a SOCA referral for the victim, you would indicate that here. Please list anyone you told about this report, as we must document each person that knows and what they did to respond.

PRIVACY

To protect the privacy of all involved, you should not discuss disclosure with others without first consulting the Title IX Coordinator at 813-974-8616.

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PAGE 11 – ATTACHMENTS



ADDITIONAL DOCUMENTS

This form will only allow one upload. If you need to submit more than one upload, please email additional evidence to denney1@usf.edu

SIGN AND DATE

Type your signature and today's date.

DON'T FORGET TO CLICK THE NEXT BUTTON TO SUBMIT!

You will then get the automated response below. If you see this response, we received your report. If you do not see this response, please submit again, or call the Title IX Coordinator at 813 974 8616.

