## SEXUAL ASSAULT INCIDENT REPORT

Instructions: This form is intended to convey information needed to track the University response to the incident being reported as well as to assess the danger the incident represents to the community at large. All efforts must be made to maintain the victim's anonymity. No information should be included which might identify the victim. Reports will be destroyed after 12 months. Return to Dr. Darleen Dempster, Sexual Assault Response Coordinator, Counseling and Testing Services, AHE Room 326.

	Dept/Office:	
PI	hone:	
Date of Report:victim:		ion with
_	Victim's Academic year:	
18 – 23 24 – 30 Over 30	Victim's gender:	
Time of Incident (indicate o	exact time if known): Morning	Afternoon
Incident Occurred:On camp	pusOff campus	
If the assault occurred on a Resident hall So	campus, indicate location: rority Fraternity	Outdoors
Other:		
Name of location (or descr	ription of location):	

Describe assault (check one):
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 (describe):
Was the absence of consent due to the victim being incapacitated by:  (a) alcohol? Yes No (b) other drugs? Yes
No
If drugs other than alcohol were involved, name the drug(s) reportedly
used:
If drugs other than alcohol were involved, how aware was the victim that she/he had ingested drugs?
Not at all aware Slightly aware Aware
Describe the kind of pressure or force used by the assailant:  None
None Verbal Pressure or arguments
Position of authority (boss, teacher, supervisor, etc.)
Threat of physical force (threatened to hit, hold, or otherwise injure)
Actually used physical force (hit, held victim down, twisted arms, etc.)
Gave victim alcohol or drugs so victim was significantly incapacitated
Other (describe):
Was a weapon involved in the assault? Yes Type of weapon
No
Number of assailants: Describe assailant(s): Gender
RaceAge
Height Weight Other (describe)

	nt(s) on campus:	: Other (describe)
		Other (describe)
If single assaila the incident:	nt, describe nat	ure of relationship with the victim prior to
Stranger Planned first date	Spontaneou	us date (e.g., met at bar or party)
Acquaintance relationship	Platoni 	ic friend of any age Dating
Relative	Other	
Name of alleged	l assailant(s):	
Housing/l	departments th	hat have received a report of this assault: Student Health Center University Police Victim's Advocate
		tion & Education Center
Other agencies, City Polic		a record of this assault:
Rape Cris	sis Center	
Hospital Other:		
Additional Infor	mation:	
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