

Anonymous Report Form

Sexual or Relationship Violence Incident

Western Oregon University takes sexual and relationship violence very seriously. Sexual misconduct is non-consensual sexual contact of any kind or the attempt to have non-consensual sexual contact or the threat of such contact. Sexual contact shall be considered non-consensual if no clear consent is freely given. Sexual contact is considered non-consensual if the person is substantially impaired by alcohol or drugs or the person is otherwise without the physical or mental capacity to give clear consent. Sexual contact means touching of any private body part, including, but not limited to: genitalia, anus, buttocks, or breasts of another or causing such person to touch the genitalia, anus, buttocks or breasts of another.

While relationship violence does not have to be of a sexual nature, it still constitutes a violation of WOU’s Code of Student Responsibility.

In order to understand the campus climate and plan a response to sexual and relationship violence, we ask that you complete this form and return it to one of the offices listed below. This form is used to gather information regarding the incidences of sexual and relationship violence on and around our campus. It is not necessary for you to be the involved party to complete this information.

Please note: *Completing this form does NOT constitute a police report nor a student conduct report.*

- To file an official report for criminal action, contact the Campus Public Safety at 503-838-8481 or the Monmouth Police Department at 503-838-1109.
- To file a student conduct report, contact Office of Student Conduct at 503-838-8930.
- Sexual assault is a form of sexual harassment. To file a sexual harassment claim, contact the Title IX coordinator in the Human Resources office at 503-838-8490.
- If in immediate danger call 911.

Please place this report in an envelope and mail or deliver to one of the following:

Office of the Vice President for Student Affairs Werner University Center Rm. 203 Monmouth, OR 97361	Student Health and Counseling Center 345 N. Monmouth Avenue Monmouth, OR 97361
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If you have questions about the form or need help filling it out please contact the Office of the Vice President for Student Affairs at 503-838-8221

Resources (These resources are available 24 hours a day and will provide crisis intervention)

Center for Hope and Safety
503-399-7722
1-866-399-7722

SABLE House
503-623-4033
1-866-305-3030

Campus Resources

Abby’s House	503-838-8219
Student Health and Counseling Center	503-838-8313
Campus Public Safety	503-838-8481
Office of Student Conduct	503-838-8930
Office of Multicultural Student Services	503-838-8737
Office of International Programs & Scholars	503-838-8425
University Housing	503-838-8311
Office of the VP for Student Affairs	503-838-8221
Athletic Compliance Officer	503-838-8121

Community Resources

Emergency Police Response	911
Monmouth Police Department	503-838-1109
Independence Police Department	503-838-1214
Salem Hospital	503-561-5200
West Valley Hospital	503-623-8301
Polk County Victim’s Assistance	503-623-9268

Western Oregon University is an affirmative-action, equal-opportunity institution committed to cultural diversity and compliance with the Americans with Disability Act. This publication can be made available in alternative formats to assist persons with disabilities. Please give reasonable notice to 503-838-8221.

Anonymous Report Form

Today’s Date: _____

REPORTER INFORMATION

Reminder: Employees of WOU are considered required reporters , thus the anonymous option is not available (unless the employee is the person who was harmed).

Your full name or Anonymous: _____

Your Phone Number (Optional): _____

Are you reporting this incident for yourself or for another person?

I experienced the situation. Someone I know experienced this situation

INVOLVED PARTIES

Involved parties may include: students, employees, or advisers, as well as clubs, groups, organizations, or teams. You can use this form to identify non- WOU individuals as well. If you are unsure, please describe the person or people below.

INCIDENT SPECIFIC INFORMATION

Date of incident: _____

Location of incident:

- Multiple locations (describe below if able)
- On-campus
- Off-campus
- Online
- Other (describe below if able)
- Unknown

Please describe the incident:

Enter as much information as you feel comfortable giving. Please know the more details you provide, the better we may be able to assist you. Attach additional pages as needed.

(Use back page if additional space is needed)