Sexual contact without consent is sexual assault whether the assailant is a stranger, someone you know or even someone you’ve had sex with before.

Sexual assault can happen to anyone regardless of gender, race, nationality or sexual orientation.

If you have been sexually assaulted, it is important to remember that you are not at fault. and you do not have to go through this alone.
Anonymous Sexual Misconduct Report Form

This form will not be seen by campus security officers or other law enforcement personnel. It is not a police, security, or judicial report. (To place such a report, refer to contact information on the back of this form.) Please read this entire form carefully.

This form collects information about sexual misconduct that occurs in the Pacific University community. In a non-threatening way, information collected from this form can be used to:
1) report summary crime statistics about sexual offenses as accurately as possible as required by federal law
2) help university personnel identify potential high risk behaviors or locations which compromise the climate of security in the university community. Preventative action such as programming or security measures may result.

Information from this form alone will not initiate legal and/or disciplinary action against the offender.

Mandatory Reporters: All Pacific University employees are obligated to let the university know of dangerous situations. Employees who oversee student activities and events, monitor the campus climate, or advise student groups are considered mandatory reporters and must submit this form when appropriate. Examples of mandatory reporters include: Residence Life, Campus Security, Coaches, Club Advisors, etc.

Incident Description (Please complete as fully as possible to aid in the collection of accurate statistics.)

Date of incident: ___________________________  Time of incident: ___________________________

Location of incident (Specify will help to identify high risk areas):

To your knowledge, is the above location:
- public property adjacent to campus
- university-operated residence hall or apartment
- off campus

On which Pacific University campus did the incident occur, or, which is closest to the above location:
- Forest Grove Main Campus
- Hillsboro Health Professions Campus
- Portland Campus/Clinics
- Eugene Campus

Misconduct Description (Please check the answer that applies to each question)

Did the offender(s) (i.e., the person or people who committed the misconduct or offense),...

- use verbal force, threats, intimidation, or coercion? ............ yes no not sure
- use physical force, e.g. hitting, holding down, etc.? ......... yes no attempted threatened no not sure
- use a weapon, e.g. gun, knife, or similar object? ............. yes no attempted threatened no not sure
- kidnap or abduct the survivor?................................. yes no attempted threatened no not sure
- keep the survivor in a place against his or her will? ......... yes no attempted threatened no not sure
- threaten to end someone’s life?............................... survivor’s offender’s someone else’s no
- engage in unwanted touching of the survivor’s private body parts, e.g. kissing, fondling, groping? ...................... yes no attempted threatened no not sure
- engage in unwanted penetration of the survivor’s genitals or anus with any object, other than the offender’s own genitals? ...................... yes no attempted threatened no not sure
- have unwanted oral or anal intercourse with the survivor?................................................................. yes no attempted threatened no not sure
- have unwanted vaginal intercourse with the survivor?..... yes no attempted threatened no not sure
- Was the survivor unable to give consent due to alcohol?.... no yes no not sure
- Was the survivor unable to give consent due to drugs?........ yes no no not sure
- Does the survivor believe they were given a drug without their consent or knowledge? ............................... yes no no not sure
- Did the offender(s) use a drug to incapacitate the survivor? yes no attempted threatened no not sure

About the Offender(s) (optional / provide as much as you feel comfortable)

Number and Gender of Offender(s) / i.e., two males, etc.:

Relationship to the assaulted person (check all that apply):
- partner, lover, spouse
- co-petitioner, ex-lover, ex-spouse
- family member
- colleague or coworker
- met same day, non-socially
- faculty member or teaching assistant
- other:

Affiliation to Pacific University (check all that apply):
- faculty
- staff
- not affiliated
- undergraduate student
- professional/graduate student
- unknown

About the Survivor (optional / provide as much as you feel comfortable)

Gender: ___________________________

Affiliation to Pacific University (check all that apply):
- faculty
- staff
- not affiliated
- undergraduate student
- professional/graduate student
- unknown

Has the survivor sought or received professional medical attention? (check all that apply)
- yes
- no

Has the survivor sought or received professional counseling or guidance? (check all that apply)
- yes
- no

Name of survivor (optional):

About the Person Completing this Form (optional / provide as much as you feel comfortable)

To your knowledge, has this incident been reported to:
- Campus Public Safety
- Dean of Students
- local police

I am the:
- survivor, person assaulted, or victim
- witness or observer
- roommate or house mate
- family member
- partner, lover, spouse
- friend
- reporting University employee (see Mandatory Reporters)
- other:

Date this form was completed: ___________________________

If you would like to be contacted about this incident, please instruct us how and when to contact you:

- no

Please deliver by hand or mail to:

Dean of Students
UC Box 6866
2043 College Way
Forest Grove, OR 97116

Report will be applied to campus statistics. The University may use information to take action to protect the campus community. You have the option to identify either offenders and/or survivors. If identified, the Dean may choose to investigate further and/or contact either party.

Form may be folded, using the address blank on the back, or put in an envelope. Please mark envelope “CONFIDENTIAL”.

Student Counseling Center can answer questions: 503-352-2191