Misconduct Report Form
Relationship Violence or Sexual Incident

Student Affairs
Melrose Hall 110
503-883-2278

Student Health, Wellness and Counseling
Walker Hall 103
503-883-2535

Title IX Officer
Susan Hopp: 503-883-2588

Title IX Deputies
Brenda Devore Marshall: 503-883-2290
Jeff Mackay: 503-883-2436
Lisa Macy-Baker: 503-883-2710
Mary Ann Rodriquez: 503-883-2458

Linfield College
Relationship Violence or Sexual Incident

***All faculty and staff are considered mandatory reporters unless listed below as confidential.

This form is used to report relationship violence or sexual misconduct on and around campus. It is not necessary for you to be the survivor to complete this information. In order to understand the campus climate and plan a response to violence and sexual misconduct, we ask that you complete this form and return it to one of the offices below.

The two options with this form are as follows:

- Anonymously report the incident information to the Sexual Misconduct Response Team (SMRT) by leaving the names of the survivor and offender blank in the last section; neither you nor the individuals involved will be contacted and provided resources.

—OR—

- Formally report the incident information to the Dean of Students by including the survivor AND offender names in the last section, allowing contact to be made and resources provided to the survivor and to the offender.

Please note: You will not be contacted by the college and no formal report can be filed, unless you provide your contact information. Completing this form does NOT constitute a police report.

- To file an official report for criminal action, contact the McMinnville Police Department at 503-434-7307 (24 hours) or Yamhill Communication Agency (YCOM) at 503-434-6500 (Monday-Friday, 9AM-5PM).

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

<table>
<thead>
<tr>
<th>Sexual Misconduct Response Team</th>
<th>Student Affairs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Linfield College</td>
<td>Melrose Hall 110</td>
</tr>
<tr>
<td>900 SE Baker Street, Unit A611</td>
<td>Linfield College</td>
</tr>
<tr>
<td>McMinnville, OR 97128</td>
<td>900 SE Baker Street, Unit A490</td>
</tr>
<tr>
<td></td>
<td>McMinnville, OR 97128</td>
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</tbody>
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If you have questions about the form or need help filling it out, contact one of the On Campus Resources listed below.

Resources

24 Hour Crisis Response:

Linfield CPS—College Public Safety: 503-883-SAFE (7233)  
Linfield Area Director on Duty: 503-883-LIFE (5433)  
Medical Emergency/Police: 911 (9-911 on campus)  
Willamette Valley Medical Center: 503-472-6131

Survivors can visit the emergency room for a FREE Safe Kit within 84 hours of a sexual assault, and receive a sexual assault examination.

If you choose to seek confidential assistance:

On Campus:

- Linfield Student Health, Wellness and Counseling: 503-883-2535 (9AM-5PM, Mon-Fri, for medical or counseling services)
- Linfield Chaplain: 503-883-2259 (8AM-5PM, Mon-Fri)

Off Campus:

- Henderson House, 503-472-1503 (24 hour): ALL SERVICES ARE CONFIDENTIAL, NO REPORT NEEDED. Services include: 24 hour crisis line, information and referrals, crisis counseling, hospital accompaniment, safe shelter, court advocacy and support groups.
- Yamhill County Crime Victim Assistance Program, 503-434-7510 (8AM-5PM, Mon-Fri): You may call anonymously and tell your story. We will believe you and offer you emotional support and information regarding the options available to you. We will explain what may happen depending on what you choose to do with the information regarding the sexual misconduct. We offer advocacy throughout the legal process if and when a police report is filed. We do not offer legal advice; we offer empowerment.

If you choose to seek private but non-confidential assistance (a formal report will be filed and you will be connected with services):

Linfield College Public Safety: 503-883-7233 | Cozine

On Campus Advisors: (Advisors are available to help students get connected to local and community resources and to help navigate the Linfield Misconduct system).

- Dan Ferguson, Activities Director: 503-883-2435, Riley 214  
- Kristi Mackay, Career Services: 503-883-2606, Walker 124

Off Campus McMinnville Police Department: non-emergency 503-434-7307 | Emergency 911 | 121 SW Adams St, McMinnville
Incident Information: Anonymous (Required)
If a survivor wishes for the incident to be recorded in college statistics, even anonymously, this section must be completed in full. All mandatory reporters are required to complete this section as well. An incident does not have to involve coercion or force to be considered a student conduct violation. Reporting drug or alcohol use here will not result in any policy violations for the survivor.

Survivor (Select Campus and Class Standing):
- McMinnville
- Portland
- Freshman
- Sophomore
- Junior
- Senior
- Unknown

Offender (Select Campus and Class Standing):
- McMinnville
- Portland
- Freshman
- Sophomore
- Junior
- Senior
- Unknown
- Non-Student

Date of incident: ____________
Time of incident: _____AM _____PM

Was force or lack of consent involved? (Check all that apply):
- Verbal
- Physical
- Alcohol
- Drugs
- Abduction
- Presence of weapon
- Other: ____________________

Does the survivor believe they were given a drug without their consent or knowledge?
- Yes
- No
- Unknown

Location of incident (Check all that apply):
- McMinnville
- Portland
- Residence Hall
- College suburb housing
- Off-campus housing
- Fraternity
- Unknown
- Other: ____________________

Was the incident (check all that apply)
- Forcible sexual contact
- Nonconsensual sexual contact
- Physical abuse
- Sexual Harassment
- Stalking
- Emotional abuse
- Mental abuse
- Other: ____________________

Do you currently or have you ever lived with the offender
- Yes, currently
- Yes, but not currently
- No

Please provide a brief description of the incident:
If a survivor wishes for the incident to be recorded in college statistics, this section must be completed in full. Mandatory reporters are required to complete this section. Additional pages may be attached as needed.
Follow Up Information
To your knowledge, has this incident been reported to Student Affairs/Residence Life, College Public Safety or the McMinnville Police?  ☐ Yes  ☐ No  ☐ Unknown
If no, what were the reasons for not reporting? ________________________________________________
If yes, please list the agencies that received the report: _______________________________________
What was the response or action taken? _______________________________________________________
Were you satisfied with this response?  ☐ Yes  ☐ No
What resources has the survivor accessed at this point? (Check all that apply):
☐ RA or Area Director  ☐ College Public Safety  ☐ Sexual Assault Survivor Advisor
☐ Student Health Center  ☐ Counseling Center  ☐ Office of Multicultural Affairs
☐ CATS Member  ☐ Student Affairs  ☐ Crime Victim Assistance Program
☐ McMinnville Police  ☐ Henderson House  ☐ Willamette Valley Medical Center
☐ County Health Department  ☐ Chaplain  ☐ Other: ________________________________

FORMAL REPORT INFORMATION (This section required for formal report)
You may formally report this incident information to the Dean of Students by including the survivor names in this section, allowing contact to be made with and resources provided to the survivor. WITHOUT COMPLETING THE NAMES IN THIS SECTION, THE REPORT REMAINS ANONYMOUS AND THE COLLEGE CANNOT TAKE ANY RESPONSE ACTION.

I am the:
☐ Survivor of the incident  ☐ Witness/observer  ☐ Agency or staff person  ☐ Roommate/friend  ☐ Other: ______________
Would you like to be contacted by:
☐ Student Affairs  ☐ Counseling Center  ☐ CPS—College Public Safety
☐ Student Health Center  ☐ Sexual Assault Survivor Advisor  ☐ Other: ________________________________
If so, please provide:
Name: ________  Phone: ________  Email: ________

Information about the Survivor Name: ________________ Gender: (s) __________ Birthdate: ______
Affiliation to Linfield: ☐ McMinnville  ☐ Portland
☐ Student  ☐ Not affiliated  ☐ Fraternity
☐ Faculty  ☐ Unknown  ☐ Residence hall
☐ Staff  ☐ Other: ______________  ☐ College suburb housing  ☐ Off campus housing
☐ Other: ______________

Information about the Offender(s) (i.e. person or people alleged to have committed the incident) (this section is optional)
Name(s): ________________  Gender: __________  Number of offenders: ______
Affiliation to Linfield:
☐ Student  ☐ Faculty  ☐ Staff
☐ Not affiliated  ☐ Unknown  ☐ Other: ______________

Residence of offender(s):
☐ Residence hall: ______________  ☐ Fraternity: ______________
☐ College suburb housing: ______________  ☐ Off campus housing
☐ College suburb housing: ______________  ☐ Unknown
☐ Other: ______________  ☐ Other: ______________

Offender’s relationship to survivor
(check all that apply):
☐ Boyfriend/girlfriend, spouse  ☐ Ex-boyfriend/ex-girlfriend, ex-spouse
☐ Colleague or co-worker  ☐ Work supervisor
☐ Faculty/staff member  ☐ Acquaintance/friend
☐ Met same day, socially  ☐ Met same day, non-socially
☐ Stranger  ☐ Other: ________________________________