

# JUST REPORT IT!

If you wish to report an incident anonymously, you may fill out this form and transmit or deliver it to the appropriate office at the contact information listed on the [Just Report It! main page](#), either by mail or in-person, without revealing your identity. Please note that anonymous reports may limit the University's ability to effectively respond. Note that, consistent with University policy, **Responsible Employees may not report anonymously**. If you wish to discuss the incident confidentially, you may access a full list of confidential resources on the [Just Report It! main page](#) which can be viewed at the following link:

<http://justreportit.virginia.edu>.

Please indicate your affiliation with UVA:     Student     Employee

Please select the policy or policies that you believe best describe the incident(s) you are reporting:

**Title IX Policy** - Covers Sexual and Gender-Based Harassment, Sexual Assault, Stalking, Intimate Partner Violence, Sexual Exploitation, Retaliation, and Complicity [the University's Title IX policy can be viewed at the following link: <http://eocr.virginia.edu/title-ix>]

**Bias Reports or Discrimination/Harassment Policy** - Covers bias and/or discrimination and harassment on the basis of age, color, race, disability, marital status, military status, national or ethnic origin, political affiliation, pregnancy, religion, sex, sexual orientation, gender identity or expression, veteran status, family medical or genetic information [the definition of bias can be viewed at the following link: <http://justreportit.virginia.edu/bias>, and the University's Preventing and Addressing Discrimination and Harassment (PADH) policy can be viewed at the following link: <http://uvapolicy.virginia.edu/policy/HRM-009>]

**Hazing Policy** - Covers any activity that is expected or required of someone to join or maintain status within a group that humiliates, degrades, or risks emotional and/or physical harm, regardless of the person's willingness to participate [the University's Hazing policy can be viewed at the following link: <http://hazing.virginia.edu>]

**Interference with Speech Rights** - Covers any incident of disruption of constitutionally protected speech (including, but not limited to distribution of literature or public speaking under the [University's Use of University Facilities or Property, and Limits on Direct Solicitation and Advertising Policy](#)).

## Complainant(s)

"Complainant" means the student, employee, or third party who presents as the victim of the reported conduct regardless of whether that person makes a report or seeks action under the relevant University policy.

If there are additional Complainants, please attach a separate sheet.

Are you the Complainant (i.e., did this happen to you)?     Yes     No

Please enter Complainant's name, if known:

Relationship with UVA:  Student  Employee  Third Party  I don't know

Other identifying information:

I cannot identify the Complainant

I would prefer not to identify the Complainant

### Respondent(s)

"Respondent" means the student, employee, or third party who committed the reported conduct.

If there are additional Respondents, please attach a separate sheet.

Please enter Respondent's name, if known:

Relationship with UVA:  Student  Employee  Third Party  I don't know

Other identifying information:

I cannot identify the Respondent

I would prefer not to identify the Respondent

### Date of Incident

Do you know the date on which the incident/conduct occurred?

Yes, and the incident/conduct occurred on \_\_\_\_\_

No  Multiple/Ongoing

Please include any additional date/time information:

## Incident Location Information

Is Location known?

Yes       No       Multiple/Ongoing       Not Applicable

If Yes, did this occur indoors or outdoors?       Indoors       Outdoors       Unknown

Location Description:

## The Incident / What Happened

Please provide a description of the incident/conduct you are reporting using specific, concise, descriptive language (who, what, where, when, and how). If you need more space, please attach additional page(s) to this form, together with any relevant supporting documentation (e.g., copies or screenshots of documents, emails, photos, text messages, and/or other evidence related to this report) you may have. Please also indicate your desired outcome, if applicable:

If you need additional space, please expand the box above or attach additional pages.

Were any student organizations involved in the incident?

None     Fraternity       Sorority       Varsity Athletic Team       Athletic Club       Agency  
 Contracted Independent Organization       Special Status       Other       Unknown

Student organization name or description, if applicable:

Did the police respond to this incident?

Yes       No       Unknown

Additional police response information (i.e. Police Report Number, officer(s) name(s), jurisdiction, etc.):