



Sexual Misconduct, Anti-Bullying and Harassment Anonymous Reporting Form

This form is for any student/staff member/visitor of The City College who has experienced any kind of harassment or sexual misconduct where the person causing the harassment or sexual misconduct was a student(s), staff member(s) or visitor(s) of City College.

If you wish to anonymously report your complaint, please use this form.

Please be aware that the information you have provided will be used to monitor such incidents and assess their impact, the matter highlighted will be investigated and any appropriate action will be taken.

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| 1. | Are you reporting this on behalf of: | |
| | Yourself | |
| | Another student of The City College | |
| | A staff member of The City College | |
| | Someone who was/is a visitor to The City College | |
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| 2. | Are you: | |
| | A student at The City College | |
| | A staff member of The City College | |
| | A visitor to The City College | |
| | | |
| 3. | Was the person involved in the incident: | |
| | A student(s) at The City College | |
| | A member of staff(s) at The City College | |
| | A visitor to The City College | |
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| 4. | Where did this incident take place? | |
|----|---|--|
| | At the City College | |
| | Outside of the City College | |
| | | |
| 5. | Why are you choosing to report this incident anonymously? | |
| | I feel embarrassed or ashamed | |
| | The victim did not wish to report it themselves | |
| | I cannot prove the incident took place | |
| | I am worried about being labelled as a trouble maker | |
| | I am concerned the person responsible would retaliate if they knew I had complained | |
| | I was concerned it would affect my career/course | |
| | I do not want to get anyone into trouble | |
| | I am unwilling to participate in meetings/do not have time to make a formal complaint | |
| | I do not feel anything would be done if I complained | |
| | | |
| 6. | When did this incident/behaviour occur? | |
| | Yesterday | |
| | This week | |
| | Last week | |
| | Last month | |
| | Last Year | |
| | More than a year ago | |
| | | |

| Did this incident? | |
|---|--|
| Happen once (an isolated incident) | |
| Happen more than once | |
| Has happened frequently | |
| | |
| Have you sought any support as a result of this incident? | |
| Yes, I have sought support from the Student Welfare Officer | |
| Yes, I have sought support from someone else at The City College | |
| Yes, I have sought support from a professional outside the college | |
| Yes, I have sought support from a friend or member of my family | |
| No, but I intend to seek support | |
| No, I do not wish to seek support | |
| Confirm the type of behaviour which took place: | |
| Making unwanted remarks of a sexual nature | |
| Following/stalking a person without consent | |
| Attempting to engage in sexual intercourse/a sexual act without consent | |
| Kissing/touching without consent | |
| Inappropriate use of sexual media | |
| Sharing sexual material of another person without consent | |
| | Happen once (an isolated incident) Happen more than once Has happened frequently Have you sought any support as a result of this incident? Yes, I have sought support from the Student Welfare Officer Yes, I have sought support from someone else at The City College Yes, I have sought support from a professional outside the college Yes, I have sought support from a friend or member of my family No, but I intend to seek support No, I do not wish to seek support Confirm the type of behaviour which took place: Making unwanted remarks of a sexual nature Following/stalking a person without consent Attempting to engage in sexual intercourse/a sexual act without consent Kissing/touching without consent Inappropriate use of sexual media |

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| Susan Riaz <u>sriaz@</u> | itycollege.ac.uk | |
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| For Official Use on | y: | |
| For Official Use on Date form received | y: _ | |
| For Official Use on Date form received Investigation carrie | y: _ d out _ | |
| For Official Use on Date form received Investigation carried Outcome/Decision | y: _ d out _ | |
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