



## USATT SAFE SPORT AND MINOR ATHLETE ABUSE PREVENTION POLICY REPORT OF MISCONDUCT FORM

### Reporting Abuse

USATT recognizes it can be difficult for an athlete, teammate, friend or family member to report an allegation of misconduct and strives to remove as many barriers to reporting as possible. You may remain anonymous if you wish. However, where appropriate, the investigative process may require further input and anonymous reporting may make it difficult for USATT to move forward with an investigation.

USATT requires reporting of physical, sexual or other misconduct by any member and strongly encourages reporting of any concerns relating to safe sport. USATT also encourages reporting of concerns related to the **Minor Athlete Abuse Prevention Policy** (“MAAPP”) contained within USATT’s SafeSport Policy. USATT appreciates your willingness to report inappropriate behavior. By submitting this form, you are giving permission to USATT's Safe Sport Program staff to contact you. Out of respect for the importance of this issue and to encourage honest and effective reporting, knowingly making a false or vindictive report will not be tolerated and may be a violation of USATT’S Code of Conduct.

A report of abuse, misconduct or policy violation that is malicious, frivolous or made in bad faith is prohibited. Such reports will be considered a violation of USATT’s SafeSport policies and grounds for disciplinary action. Depending on the nature of the allegation, a person making a malicious, frivolous or bad-faith report may also be subject to civil or criminal proceedings.

\* Must be completed

\*Date: \_\_\_\_\_

### **Person Being Reported**

Provide as much information as possible about the person you are reporting.

First Name \* \_\_\_\_\_

Last Name\* \_\_\_\_\_

Position or Role\* \_\_\_\_\_

Age or Approximate Age\* \_\_\_\_\_

Gender (circle one):      Male Female

Club Affiliation \* \_\_\_\_\_

Position(s) this individual holds or held (circle or insert all that apply):

Head Coach

Assistant Coach

Athlete

Official

Other \_\_\_\_\_

**Alleged Misconduct Information**

Please provide as much specific information as you are able.

Type of Misconduct (circle or insert all that apply) \*

Bullying                      Emotional                      Hazing                      Physical  
Harassment                      Sexual                      Other\_\_\_\_\_

**MINOR ATHLETE ABUSE PREVENTION POLICY**

Does this matter involve an alleged violation of USATT’s Policy regarding One-On-One Contact Between an Adult Participant and Minor-Aged Athlete? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, what area covered by USATT’s MAAP Policy is allegedly implicated in this matter?

- \_\_\_\_\_ Meetings and Training Sessions
- \_\_\_\_\_ Athletic Training Modalities, Massages or Rubdowns
- \_\_\_\_\_ Locker Rooms, Changing Areas and Similar Spaces
- \_\_\_\_\_ Electronic Communications
- \_\_\_\_\_ Transportation (In-Program Travel)
- \_\_\_\_\_ Lodging
- \_\_\_\_\_ Gifting
- \_\_\_\_\_ Photography/Video

Details Regarding the Alleged Incident(s)

Location(s) where the incident(s) took place (include any relevant locations with City/State)

\_\_\_\_\_

Date(s) or Approximate Date(s) of Misconduct: \* \_\_\_\_\_

Description of Alleged Misconduct: Please include as much detail as possible  
(Please use a separate sheet and/or Page Five of this Report Form, if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Victim or Victims**

Please identify the victim below. If you wish the victim to remain anonymous (whether the victim is yourself or someone else), then please enter the name as Anonymous. If the Victim is unknown, please enter, "Unknown."

First Name (or Anonymous or Unknown):\* \_\_\_\_\_

Last Name (or Anonymous or Unknown):\* \_\_\_\_\_

Age or Approximate Age\* \_\_\_\_\_ Gender: Male Female

Additional Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please List Any and All Additional Victims – Please Use a Separate sheet if necessary**

First Name (or Anonymous or Unknown):\* \_\_\_\_\_

Last Name (or Anonymous or Unknown):\* \_\_\_\_\_

Age or Approximate Age\* \_\_\_\_\_ Gender: Male Female

Additional Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

First Name (or Anonymous or Unknown):\* \_\_\_\_\_

Last Name (or Anonymous or Unknown):\* \_\_\_\_\_

Age or Approximate Age\* \_\_\_\_\_ Gender: Male Female

Additional Information: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Your Name and Relationship to the Victim(s)**

At your option, you may identify yourself and your relationship to the victim. Alternatively, you may remain anonymous. However, where appropriate, the investigative process may require further input, and therefore anonymous reporting may make it difficult for USATT to move forward with an investigation.

First Name (or Anonymous or Unknown):\* \_\_\_\_\_

Last Name (or Anonymous or Unknown):\* \_\_\_\_\_

Age or Approximate Age\* \_\_\_\_\_ Gender: Male Female

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

- Relationship to Victim:
- |                        |                 |                     |
|------------------------|-----------------|---------------------|
| Self                   | Parent/Guardian | Other Family Member |
| Friend or Acquaintance | Club Member     | Coach or Volunteer  |
| Prefer Not to Say      | Other _____     |                     |
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**Individuals Who May Have Additional Information**

List anyone who may be able to provide additional information regarding the alleged offense. We will not identify you when we contact these individuals.

First Name (or Anonymous or Unknown):\* \_\_\_\_\_

Last Name (or Anonymous or Unknown):\* \_\_\_\_\_

Age or Approximate Age\* \_\_\_\_\_ Gender: Male Female

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

- Relationship to Victim:
- |                        |                 |                     |
|------------------------|-----------------|---------------------|
| Self                   | Parent/Guardian | Other Family Member |
| Friend or Acquaintance | Club Member     | Coach or Volunteer  |
| Prefer Not to Say      | Other _____     |                     |
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**Additional Information**

Please provide any other information that you feel would be helpful to an investigation of the alleged offense you have reported

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