USA FIELD HOCKEY’S MISCONDUCT REPORT FORM

Reporting Policy
USA Field Hockey requires reporting of sexual misconduct by any member and strongly encourages reporting of any concerns relating to safe sport. USA Field Hockey appreciates your willingness to report inappropriate behavior. By submitting this form, you are giving permission to USA Field Hockey’s Safe Sport administration staff to contact you.

USA Field Hockey 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 will make it difficult for USA Field Hockey to move forward with an investigation.

Out of respect for the importance of this issue and to encourage honest and effective reporting, 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 USA Field Hockey’s Safe Sport 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.

Alleged Abuser Information:
Provide as much information as possible about the person you are reporting.

Last Name: _____________________________________________________________________________
First Name: _____________________________________________________________________________
Address: _______________________________________________________________________________
Age or Approximate Age: ______________
Gender:   ___ Female       ___ Male
Club Affiliation: __________________________________________________________________________

Position(s) this individual holds or held:
    ___ Head Coach       ___ Assistant Coach       ___ Athlete
    ___ Official       Other: ____________________________________________________________________

Alleged Misconduct Information:
Type of Misconduct (select all that apply):
    ___ Sexual Abuse       ___ Physical Abuse       ___ Emotional Abuse
    ___ Bullying       ___ Harassment       ___ Hazing
    ___ Locker Room Violation       ___ Electronic Communication Violation
Other: __________________________________________________________________________

Location that the misconduct took place:
_______________________________________________________________________________________
_______________________________________________________________________________________

Date(s) of alleged misconduct:
_______________________________________________________________________________________
_______________________________________________________________________________________
Description of alleged misconduct (include as much detail as possible):
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
知识 of victim(s) involved in the alleged misconduct:
___ I am not aware of any victim(s) involved in the alleged misconduct
___ I am aware of a victim(s) involved

Victim or Victims:
If you are the victim and wish to remain anonymous, you may do so. In that case, please write your name as Anonymous. You may also be unaware of who the victim is. In that case, please write Unknown.
Last Name: _____________________________________________________________________________
First Name: _____________________________________________________________________________
Age or Approximate Age: ______________
Gender:       ___ Female         ___ Male
Additional Information:
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

Fill this out if additional victims are involved:
Last Name: _____________________________________________________________________________
First Name: _____________________________________________________________________________
Age or Approximate Age: ______________
Gender:       ___ Female         ___ Male
Additional Information:
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

Individual(s) Who May Have Additional Information:
List anyone who may be able to provide additional information regarding the alleged misconduct. We will not identify you when we contact these individuals.
Last Name: _____________________________________________________________________________
First Name: _____________________________________________________________________________
Address: _______________________________________________________________________________
Phone: ________________________________________________________________________________
Email: ________________________________________________________________________________
Club Affiliation: ____________________________________________________________________
Report Submitted By:

You may remain anonymous. However, providing your information is vastly helpful to an efficient and effective investigation. All reports are kept strictly confidential by Safe Sport Committee, however, the Safe Sport Committee cannot guarantee the confidentiality of your identity due to investigative, adjudicative or law enforcement requirements. Retaliation against an individual who made a report in good faith is a violation of the USA Field Hockey Safe Sport Program.

Relationship to Victim:

___ Self
___ Other family member
___ Prefer not to say
___ Parent/guardian
___ Friend or acquaintance
___ Club member
___ Coach or volunteer
Other: ____________________________