

# BIAS REPORTING FORM



## INCIDENT INFORMATION

Date of Incident (mm/dd/yyyy): \_\_\_\_\_

If known, indicate time of incident (\_\_:\_\_ am/pm): \_\_\_\_\_

If the time or date of incident is unknown, please indicate *when it was found* (mm/dd/yyyy and \_\_: \_\_ am/pm): \_\_\_\_\_

Location of incident (please be as specific as possible): \_\_\_\_\_

The incident was (check all that apply or **highlight** if submitting this electronically):

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Verbal assault             | <input type="checkbox"/> Property damage          | <input type="checkbox"/> Text message harassment |
| <input type="checkbox"/> Threat of physical assault | <input type="checkbox"/> Threat of "outing"       | <input type="checkbox"/> Other (please specify)  |
| <input type="checkbox"/> E-mail or Internet Message | <input type="checkbox"/> Written slur or graffiti |  |
| <input type="checkbox"/> Physical assault           | <input type="checkbox"/> Phone harassment         |  |

I think the incident occurred because of/involved (check all that apply or **highlight** if submitting this electronically):

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Age                        | <input type="checkbox"/> Marital status             | <input type="checkbox"/> Religious practice     |
| <input type="checkbox"/> Gender identity/expression | <input type="checkbox"/> Physical or mental ability | <input type="checkbox"/> Veteran status         |
| <input type="checkbox"/> Race                       | <input type="checkbox"/> Sexual orientation         | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Sex                        | <input type="checkbox"/> Ethnicity                  |   |
| <input type="checkbox"/> Economic background        | <input type="checkbox"/> Nationality                |   |

Please describe the incident. Please provide as much detail as possible.

Was this incident reported to Stonehill College Police (please check one or **highlight** if submitting electronically)?

- Yes  
 No

If not, what were the reasons for not reporting:

Do you have a photo of the bias incident?

- Yes (if yes, please submit it to [diversity@stonehill.edu](mailto:diversity@stonehill.edu) when you submit this form; or print it and attach it to this report when you turn it in)
- No

**ALLEGED OFFENDER INFORMATION**

Number of offenders: \_\_\_\_\_

If known, please include name, physical appearance, etc:

Relationship of alleged offender to alleged victim:

- |   |                                     |  |
|---|-------------------------------------|--|
| <input type="checkbox"/> Stranger             | <input type="checkbox"/> Classmate  | <input type="checkbox"/> Acquaintance            |
| <input type="checkbox"/> Friend               | <input type="checkbox"/> Supervisor | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> Instructor/professor | <input type="checkbox"/> Roommate   |  |
| <input type="checkbox"/> Relative             | <input type="checkbox"/> Co-worker  |  |

**YOUR PERSONAL INFORMATION**

Name (last, first): \_\_\_\_\_

Email: \_\_\_\_\_

Phone: (            )            --

May someone from the Bias Response Team contact you?:

- |                              |                             |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

In your opinion, should this matter be addressed by the College?

- |                              |                             |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

Please use this space to suggest a response by the College:

There are a number of ways you can report this bias incident.

1. You may save and submit an electronic form to [diversity@stonehill.edu](mailto:diversity@stonehill.edu) by uploading this as an attachment with the subject line RE: Bias Incident **OR**
2. You may complete/print this and give it to a Residence Life Staff member **OR**
3. You may complete/print and send it through Campus Mail to Intercultural Affairs **OR**
4. You may complete/print this and turn it in at the Intercultural Resource Center in the Roche Dining Commons.