

**TYSA SAFE SPORT INCIDENT REPORTING FORM**

Please fill out the fields below to the best of your knowledge. Out of respect for the importance of this issue, and to encourage honest reporting, knowingly making false or vendicitive claims will not be tolerated and may be in violation of TYSA’s Safe Sport Policy.

Once completed, please email this form to the TYSA Safe Sport Official at SafeSport@TYSA.com

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|  **DATE OF REPORT**  |
|  / / |

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| **PERSON SUBMITTING THIS REPORT** |
| NAME (First) (LAST) |
| TEAM/PROGRAM -  | PHONE:  | EMAIL:  |
| DID YOU WITNESS THE ALLEGED OFFENSE?: [ ]  YES [ ] NO |  |
| RELATIONSHIP TO VICTIM: [ ] COACH [ ] ATHLETE [ ] TRAINER [ ] VOLUNTEER [ ]  PARENT/GUARDIAN [ ] OTHER FRIEND/FAMILY MEMBER [ ] SELF [ ] PREFER TO NOT SAY [ ] OTHER:  |

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| **PERSON WHO IS BEING REPORTED** |
| NAME (First) (LAST) |
| TEAM/PROGRAM -  | GENDER -  | AGE (appox) -  |
| POSITION HELD - [ ] COACH [ ] ATHLETE [ ] TRAINER [ ] VOLUNTEER [ ] PARENT [ ]  OTHER:  |  |

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| **ALLEGED OFFENSIVE INFORMATION** |
| TYPE OF VIOLATION (*check all that apply*): |
| [ ] Bullying [ ] Harassment [ ] Physical Misconduct [ ] Emotional Misconduct [ ] Child Abuse (emotional and/or physical) [ ] Sexual Misconduct [ ]  Aiding and Abetting [ ] Misconduct Related to Reporting[ ] Other:  |
| Incident Location Occurred:  |
| Date Offense was observed:  |
| Description of observed offense: |

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| **VICTIM OR VICTIMS INFORMATION** |
| NAME (First)  |
| TEAM/PROGRAM -  | GENDER -  | AGE (appox) -  |
| ADDITIONAL INFORMATION: |  |

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| **WITNESS INFORMATION** |
| NAME (First)  |
| TEAM/PROGRAM -  | GENDER -  | AGE (appox) -  |
| PHONE: | EMAIL: |  |
| RELATIONSHIP TO THE PARTIES INVOLVED: |

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| **ADDITIONAL INFORMATION** |
| Please include any other information you feel would be helpful to an investigation of the alleged offense that you are reporting: |
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