

# NEW YORK FILM ACADEMY

COLLEGE OF VISUAL AND PERFORMING ARTS

## Incident Report for Sexual Misconduct

Who should complete this form? Any NYFA official (including, but not limited to members of Senior Administration, Faculty and Staff.) This form is used to report an incident of student Sexual Misconduct to New York Film Academy Title IX Coordinator and members of senior administration on a need- to-know basis.

**Today's Date:** \_\_\_\_\_

**Time:** \_\_\_\_\_

*Date and Time Alleged Sexual Misconduct was reported for the first time (if not today):* \_\_\_\_\_

### Information Regarding the Complainant

**Name of the Complainant:** \_\_\_\_\_  Male or  Female

Complainant's Phone Number: \_\_\_\_\_

The Complainant is (please circle one):  Faculty member  Staff member  Student  Other

Preferred Method of Contact:  Phone  Email \_\_\_\_\_

*If the Complaint is not the Alleged Victim, Name of Victim:* \_\_\_\_\_

The Alleged Victim is (please circle one):  Faculty member  Staff member  Student  Other

Complainant's ( or Alleged Victim, if not the Complainant) Age: \_\_\_\_\_

Does the Alleged Victim feel safe? Are they in immediate danger? \_\_\_\_\_

Is the Alleged Victim injured? If so, briefly describe injury: \_\_\_\_\_

Has the Alleged Victim received any Medical Treatment?  Yes  No

If yes, to what extent?:  Counseling  Medical

If treatment was given away from campus, where was it given?

Facility: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

### Information Regarding the Respondent (Accused)

**Name of Respondent:** \_\_\_\_\_  Male or  Female

Was the Respondent an acquaintance or unknown? \_\_\_\_\_

The Respondent is (please circle one):  Faculty member  Staff member  Student  Other

### Information Regarding the Alleged Sexual Misconduct

Date/Time (AM/PM) Alleged Incident occurred: \_\_\_\_\_

Where did the incident occur? \_\_\_\_\_

Was Alleged Incident reported to Local Law Enforcement?  Yes  No

*If yes, when and where was it reported?* \_\_\_\_\_

3300 Riverside Drive, Burbank, CA 91505 | [www.nyfa.edu](http://www.nyfa.edu) | Tel: 1-888-988-NYFA | +1-818-333-3558 | Fax: 818-333-3557 | Email: [studios@nyfa.edu](mailto:studios@nyfa.edu)

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### What happened? Briefly describe the incident:

You may wish to consider including, among other things, some or all of the following information in your description: the gender of the parties, the relationship between the parties, whether one or more of the parties were under the influence of alcohol or drugs at the time of the alleged Sexual Misconduct, and whether the Respondent used pressure or force (physical or otherwise) in the course of the alleged Sexual Misconduct.

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### Who else has the student told? Where there other witnesses to the assault?

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### Is there any additional information the Complainant would like to share?

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Does the Complainant want to report the incident to the police?  Yes  No  Undecided/At a later date

### **Responding to the Student, please check-off on the following information:**

- Affirm the student for making the decision to reach out to someone.
- Reassure the student that there are many resources available.
- Provide the student with the *Student Resources for Sexual Misconduct*, *Suggested Actions for Victims of Sexual Violence*, and *Complaint Timeline* documents and review them together
- Explain New York Film Academy's disciplinary process and Title IX.

**Important Items to Remember:** Give options, not advice. Focus on choices that must be made first. *It can be overwhelming for the student to consider the implications all at once:* police intervention, medical care, whom to tell, work and school arrangements, psychotherapy, support groups, where the perpetrator is now, what he or s/he might do next, etc. Immediate threats to health and safety come first. *Give written information and referrals.*

Person completing this form is:  Faculty member  Staff member  Other, \_\_\_\_\_

Report Completed by: \_\_\_\_\_ Signature: \_\_\_\_\_

**To ensure the proper handling of this sensitive data, please scan and email this form to: [NYtitle9@nyfa.edu](mailto:NYtitle9@nyfa.edu) Please contact the Title IX Coordinator, Carlye Bowers if you any questions.**

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