GLHSON has an expectation that employees and students will share information they receive about incidents that may potentially impact negatively on the GLHSON community and environment. We recognize, however, that at times individuals may not feel comfortable making an official report but need someone to talk with about options for reporting and supports that are available to them. When this is the case, we suggest that the individual seek the support of a School Employee. This Anonymous Reporting Form is intended to be used by any student or employee who wishes to convey information to the Title IX Coordinator that is needed to track the School’s response to Title IX incidents, both on and off campus, as well as to assess the danger the incident represents to the individuals involved and the GLHSON community as a whole. Annual statistical information will be based on this report, as well as the need to make timely warning to the community, for the protection of those who may be at risk.

Instructions: Fill in all fields that apply. Report one incident per form. Feel free to attach additional pages as needed.

Optional: Name of the reporting individual(s): ________________________________

Status of reporting individual:
☐ Student ☐ Faculty ☐ Staff ☐ Administrator ☐ Unknown

Optional: Name of the alleged respondent(s): ________________________________

Status of alleged respondent:
☐ Student ☐ Faculty ☐ Staff ☐ Administrator ☐ Unknown

Date of incident: ______________ Time of incident: _______________

Where did the incident occur? ___________________________________________

If you wish to avoid specifics, check one of the following (check one):

☐ On-campus ☐ Off-campus ☐ Residence ☐ Clinical Site ☐ Other: ________
Please describe the incident in as much detail as possible (who, what, where, when and how):

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
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_____________________________________________________________________
_____________________________________________________________________

Nature of reported incident:
☐ Sexual Harassment ☐ Domestic Violence ☐ Cyber Stalking ☐ Stalking
☐ Sexual Assault ☐ Dating Violence ☐ Sexual Violence ☐ Other

Do you have reason to believe this incident represents a present threat of harm or danger to the reporting individual or other members of the Community? ☐ Yes ☐ No
If yes, why:
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Was a weapon involved? ☐ Yes ☐ No
Number of perpetrators: _______
Describe respondent(s) by gender, race, age, height, weight:

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Is there any evidence that the incident was related to (check all that apply):

☐ Race ☐ National origin ☐ Age ☐ Gender ☐ Sexual orientation

☐ Religion ☐ Disability

Other departments or individuals to whom the reporting individual has reported this incident:

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Name and contact information of any available witnesses:

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________


Submitting Your Report:
Submit this form in any of the following manners:

- Drop it in the black mailbox in front of the Administration office.
- Mail to a Title IX Coordinator; 400 Highland Avenue, Lewistown, PA 17044
- Drop it by the Administrative Office marked “Confidential” and instruct it be given to the Title IX Coordinator, Harriet Arndt.

In addition, you may also report the incident to the Ethics Hotline:

- Staff and faculty may report at the Anonymous Ethics Hotline 800-292-1627, or [http://www.geisinger.org/alertline](http://www.geisinger.org/alertline)
- Students may report at the Anonymous Ethics Hotline 844-600-0042.