Playhouse 1960 Harassment Incident Report

Production Name: _____ Today's Date: _____

Name of Person Making Report: _____ Role in Production: _____

Contact Info for Person Making Report Phone: _____ Email: _____

DATE OF INCIDENT	TIME	PLACE
_____/_____/_____ mm dd yyyy	❑ Rehearsal hours ❑ Show hours ❑ Other Time: _____	❑ Stage/Seating ❑ Dressing Rooms ❑ Backstage ❑ Lobby/Foyer ❑ Restrooms ❑ Other: _____

INCIDENT	TYPE
Type of Conduct (check all that apply) ❑ unwelcome sexual advances ❑ requests for sexual favors ❑ verbal conduct – slurs, threats, etc. ❑ written conduct – notes, emails, texting, social media, etc. ❑ visual conduct – body language, gestures, intimidation, etc. ❑ physical conduct – assault, battery, etc. ❑ sexual assault – unwelcome touching, sexual touching, rape, etc. ❑ property damage – destruction, graffiti, arson, etc. ❑ other: _____	**Type of Harassment** (check all that apply) ❑ race or ethnicity ❑ sex ❑ sexual orientation ❑ disability ❑ religion or creed ❑ other: _____ **Describe Incident**: (Use back of sheet for more space or can attach additional sheets or emails/text documentation)

Alleged Harasser	Victim	Witness(es)
❑ Cast Member ❑ Crew/Directing Team ❑ Other _____ Name: _____ Age: _____	❑ Cast Member ❑ Crew/Directing Team ❑ Other _____ Name: _____ Age: _____	Name: _____ Phone: _____ Name: _____ Phone: _____
Alleged Harasser Contact Info	**Victim Contact Info**	**Resolution**
Phone: _____ Email: _____ Address: _____ _____	Phone: _____ Email: _____ Address: _____ _____	Please check one: ❑ Formal Warning ❑ Formal Removal from Production ❑ Complaint dropped ❑ Other: _____ _____

I certify that the information on this report is true and correct to the best of my knowledge.

_____

Signature of person filling out form *print name* *phone*

This complaint was reviewed by and action taken by: ❑ Production Director ❑Playhouse 1960 Board Member

_____

Signature of Director or Board Member *print name* *phone*