

**BOX TIE STUDIO, LLC
CONSENT INCIDENT REPORT**

NAME _____ **DATE** _____

FETLIFE USERNAME _____

EMAIL ADDRESS _____ **PHONE** _____

or

_____ **ANONYMOUS REPORT**

1. Whose behavior are you reporting? (Real name, scene name, social media username, or a description of the person will suffice) _____

2. Were there witnesses or anyone else involved? _____

3. What are you reporting? Please provide a detailed description of the behavior/incident. _____

4. Where and when did this occur? (Location, date, time, etc.) _____

5. How has this impacted you? (Optional) _____

6. How would you like to proceed next?

- I just want you to know about this incident; no follow-up is needed.
 - I would like to discuss this incident with an organizer, but you don't need to talk with the person I'm reporting.
 - I want you to investigate this incident and follow up appropriately with the involved parties according to the Box Tie Studio Consent & Incident Reporting Policies.
 - I would like a formal mediation with the involved parties to reach a resolution.
 - Other: _____
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7. How can we best support or help you? _____

PLEASE ATTACH ANY ADDITIONAL INFORMATION OR SUPPORTING DOCUMENTATION ON A SEPARATE SHEET OF PAPER WITH EITHER YOUR NAME OR "ANONYMOUS" AND THE DATE OF THE INCIDENT.

OFFICIAL USE ONLY

REPORT RECEIVED BY _____ **ON THIS DATE** _____

ACTION(S) TAKEN: _____

Box Tie Studio Representative Signature