## Rite of Passage Safe Environmental Standards/PREA Third Party Reporting Form

Please provide youth's information	on:		
Student's First & Last Name:	Program/Site Na	Program/Site Name:	
Please provide details of the alleg	ged incident:		
Date of alleged incident:		Time of alleged incident:	
Who was involved:	<u> </u>		
What happened:			
Where did it occur:			
How did it occur:			
Any other pertinent information	:		
Please provide your information :	so that we may reach	you if needed:	
Your First & Last Name:	Telephone Numb	per: Email A	address:

Upon completion, return this form to the control desk/receptionist. You may also mail the form to: Rite of Passage, 2560 Business Parkway, Minden, NV 89423 Attn: PREA Coordinator 3<sup>rd</sup> Party Reporting

Rite of Passage has a Zero Tolerance Policy for all forms of sexual abuse and sexual harassment