

**Rite of Passage Safe Environmental Standards  
Third Party Reporting Form**

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***Please provide youth's information:***

Student's First & Last Name:	Program/Site Name:	Today's Date:
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***Please provide details of the alleged incident:***

Date of alleged incident:	Time of alleged incident:
Who was involved:	
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 Number:	Email Address:
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Upon completion, return this form to the control desk/receptionist. You may also mail the form to:  
Rite of Passage, 2560 Business Parkway, Suite A, 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**