

Hazing Report

A hazing incident may be reported to the Dean of Students office by anyone: a person who was directly affected by the activity, a person who was involved in the incident; faculty, staff, parents, friends, or community members; or anyone who is generally concerned about a student or group. If you have witnessed or have knowledge of a possible hazing incident, report the incident immediately to Dean of Students and/or the police.

Anonymous Reporting: it is encouraged that you include your name so our staff can investigate and ask follow up questions. The Dean of Students staff will investigate all reports of hazing behavior, including those reported anonymously. However, please be aware that Dean of Students staff's ability to investigate hazing incidents depends on the accuracy and specificity of the information you provide. You are encouraged to provide as much detail as possible so that appropriate action can be taken to address the behavior. You have the option to submit a report anonymously, but the Dean of Students staff may be limited in completing the investigation and taking disciplinary action without knowing the source of the report.

Feel free to contact the following departments with additional information:

Dean of Students office: (618) 453-2461 deanofstudents@siu.edu
Fraternity & Sorority Life: (618) 453-7526 Greeks@siu.edu
Student Rights & Responsibilities: (618) 536-2338 studentrights@siu.edu
SIU Department of Public Safety: 618/453-DPS1 (3771) DPSAdministration@dps.siu.edu

Information

Anonymous Report [Required]

Do you want to submit this report anonymously? If you choose, yes, we will not share your name with the alleged organization. If you choose "No", your name might be shared.

Valid input:

- Select only one choice.

Yes, this is an anonymous report (name not shared)

No

Your Contact Information [Required]

In order to prevent false reporting, we require your name for submission so we can verify the source of the report. You may choose to make this report anonymous (see the above question).

Valid input:

- must be 10-15 digits long and may include only numbers, hyphens, and spaces.

- name@myschool.edu

First name:

Middle initial:

Last name:

Email address:

Phone number:

Address:

City:

State:

ZIP:

Organization Name [Required]

What is the name of the organization that you are reporting for acts of hazing?

When? [Required]

When did the event(s) occur? What's the date?

Where? [Required]

Where did the event(s) take place? Address?

Time? [Required]

What time of day did the event(s) occur?

Who? [Required]

Who was involved in this event?

Others?

Are there any other people that either were present or can corroborate the information you are providing? Please provide their names and contact information (if available).

How did you become aware? [Required]
How did you become aware of the event(s)?

Describe the events [Required]
Please describe the event(s) in as much detail as possible.

Documentation or Photos 1
Please provide any documentation or photographs you may have. This maybe screen shots, social media posts, emails, photos, etc.

Documentation or Photos 2
Please provide any documentation or photographs you may have. This maybe screen shots, social media posts, emails, photos, etc.

Documentation or Photos 3
Please provide any documentation or photographs you may have. This maybe screen shots, social media posts, emails, photos, etc.

Documentation or Photos 4
Please provide any documentation or photographs you may have. This maybe screen shots, social media posts, emails, photos, etc.

Documentation or Photos 5
Please provide any documentation or photographs you may have. This maybe screen shots, social media posts, emails, photos, etc.