

- BROOKE HOUSE
- COOLIDGE HOUSE
- HAMPSHIRE HOUSE
- HORIZON HOUSE
- McGRATH HOUSE



Today's Date: _____

Mail to:
 CRJ PREA Coordinator
 500 Harrison Avenue, Suite 1-F
 Boston, MA 02118

Third Party Reporting Form

To Report Sexual Abuse or Sexual Harassment on Behalf of an Offender

-or-

E-mail to:
 PREA@crj.org

Third party individuals should complete this form to report sexual abuse or sexual harassment on behalf of a resident.

CONTACT INFORMATION

Name of Third Party Reporter: *(Last, First)*

Phone: *(optional)* _____ Best time to contact you: **Morning** **Afternoon**

DESCRIPTION OF INCIDENT

Date of Incident *(if known)* _____ Sexual Abuse Sexual Harassment Unknown

Offender(s) involved

Staff member(s) involved

Type of Incident *(if known)*

Description of Incident: *(Please provide any information that may be useful in our investigation.)*

If you have additional questions or concerns please call (617) 423-2020, Ext. 2300