

Preventing Sexual Violence in Higher Education Act Annual Report
Form

Name of Higher Education Institution: _____
Campus if applicable: _____
Completed By/Primary Contact: _____
Address: _____
Phone Number: _____ Email Address: _____

Program name	Type/description	Date(s)	Location(s)	Target audience	Number of attendees

B. Employee Training(optional)

Identify any and all training provided to higher education institution employees who, with respect to reports of sexual violence, domestic violence, dating violence or stalking: (1) receive student reports, (2) refer or provide services to survivors or (3) participate in the complaint resolution procedure. See ILCS 155/30(c). If necessary, append additional pages.

Program name	Type/description
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A. Responses to Reports to the Title IX Coordinator or Responsible Employees

Of the total number of reports or disclosures made to the Title IX coordinator or responsible employees at the higher education institution (identified in Part B, Section II), please report the number of times the following occurred:

	Survivor requested not to proceed with the complaint resolution procedure	HEI investigated allegation	HEI referred allegation to local or State law enforcement	HEI resolved allegation through complaint resolution procedure
Sexual violence				
Domestic violence				

Dating violence

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