

**Multi- County Juvenile Attention System
Third Party Reporting Form
Alleged Sexual Abuse, Sexual Assault and Sexual Harassment**

Please provide resident's information:

Resident Name:

Please provide details of the alleged incident:

Date of alleged incident:	Time:
Who was involved:	
What happened:	
Where did it occur:	
How did it occur:	
How did you find out about the alleged incident:	
Any other pertinent information:	

Please provide your information:

Reporter's Name:	Telephone Number:	Email Address:
-------------------------	--------------------------	-----------------------

Upon completion of form:

Please email form to the PREA Coordinator at: jcmckenzie@mcjas.org

Or send via mail to:

MCJAS PREA Compliance ATTN: Jamey Mckenzie 815 Faircrest Street sw Canton, Ohio 44706

***If you feel a resident is subject to a substantial risk of imminent harm, immediately notify the PREA Coordinator of your concerns by calling (330) 484-6471, extension 2820, or if not available, dial "0" to speak to any staff member. Staff shall immediately forward the concern to a level of review where immediate corrective action may be taken.