



Bias Incident Reporting Form

St. Olaf College is committed to creating and maintaining an environment in which all members of the St. Olaf community — students, faculty, and staff — are treated with respect and dignity, free from bias and harassment. Faculty, staff, and students are together responsible for maintaining an educational and working environment that is consistent with institutional values.

Incidents of bias, harassment, and hate crimes all include some form of unwelcome conduct that is based on a person's race, color, creed, religion, national origin, sex, sexual orientation, disability, age, marital status, status with regard to public assistance, or any other protected class status.

If you need to report an immediate emergency, call Public Safety at (507) 786-3666, or dial 911.

Please use this form to report any behaviors of concern involving St. Olaf College students, faculty or staff, whether these behaviors occur on or off campus. Reportable behaviors may include Student Code of Conduct violations or any other behaviors of concern that you would like to see addressed or would like to discuss. When completing this form, please include your name, title, and contact information. If you have knowledge of someone being harmed in our community or violating the Student Code of Conduct, you are encouraged to report the incident.

If you have any questions regarding filing an incident report, please contact the Vice President for Equity and Inclusion (miles3@stolaf.edu  <mailto:miles3@stolaf.edu>)). Privacy - Terms

Background Information

Enable additional features by logging in. [🔗 \(https://cm.maxient.com/reportingform.php?StOlafCollege&layout_id=2&promptforauth=true\)](https://cm.maxient.com/reportingform.php?StOlafCollege&layout_id=2&promptforauth=true)

Your full name:

Your position/title:

i Learn more

Your email address:

Date of incident (Required):

mm/dd/yyyy

Time of incident:

i Learn more

Location of incident (Required):

Please select a location ...

Specific location:

Involved Parties

INVOLVED PARTIES SECTION TEXT

Name or Organization

Select Role

Email address

Add another party

Questions

QUESTIONS

Please provide a detailed description of the incident/concerning behavior. (Who, what, where, when, why, and how).

Who was the target of the behavior?

Who engaged in the behavior?

If an involved person is a non-student, please provide as much descriptive/demographic information as possible:

Are you open to a BIAS Response team member reaching out to you if we have questions or need clarification?

- Yes
- No
- No - I am sending this just for documentation purposes

Supporting Documentation

Photos, video, email, and other supporting documents may be attached below. 5GB maximum total size.

Attachments require time to upload, so please be patient after submitting this form.

Choose files to upload	Choose Files
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Email me a copy of this report

Submit report