(Revised 02/2015)



## New Jersey Juvenile Justice Commission Third Party PREA Complaint Form Report of Sexual Abuse or Sexual Harassment of a Juvenile

- 1. A report of sexual abuse or harassment against a juvenile who is 18 years of age or older may be made directly to the Commission by any third-party, <u>provided</u> that the juvenile has consented to the making of the report. The Commission will not process any such report by a third-party unless the consent requirement has been satisfied.
- 2. In addition, with respect to a juvenile who is under the age of 18, his or her <u>parent or guardian</u> may report an incident of sexual abuse or sexual harassment on the juvenile's behalf without the juvenile's consent.
- 3. Reports should be mailed or faxed to the attention of the **Deputy Executive Director Operations** at: NJ Juvenile Justice Commission

1001 Spruce Street, Suite 202

Trenton, NJ 08638 Fax: (609) 943-4614

<ol> <li>Additional methods for filing a report of sexual a Juvenile Justice Commission's Prison Rape Elimin is posted under the PREA tab on the Commission</li> </ol>	ation Act (PREA)	policy (Policy E	D:01.02 (2014), as m	ay be ame	= :::	
Name of Juvenile:	Date of Birth:		Assigned Facility			
A. Personal Information						
Name of Reporting Person:		Home/Work Telephone:				
Mailing Address (include City, State, Zip Code):						
E-Mail Address:	Cellular Telephone:					
2. Relationship to Juvenile:	ent 🗌 Guar	dian	☐ Other			
If "Other", please check as appropriate:   Cle	rgy 🗌 Legal	Representativ	/e Uictim A	dvocate	Other Third-Party	
If "Other", please provide the name of your orgalegal clinic, or describe your relationship to the s		1,				
Check "Yes" to confirm that the Juvenile has give consent to the filing of this report:	en his/her	Yes				
Describe how consent was secured from the Juve documentary evidence of consent:	enile. Attach any					
B. Report of Incident - Provide details including	g, but not limited	to the followin	ng (attach additional	pages if ne	cessary):	
3. Date, time, and place of the incident?						
4. Description of incident and any items of evidence (e.g., items used as a weapon, clothing, bedding):		i e				
5. Names and contact information of potential witnesses:						
6. To your knowledge, did the juvenile previously reincident? If "Yes", please explain:	eport this					
Signature of Reporting Person:			Date:			
Received by (For Juvenile Justice Commission Use)				e:		