Ethical Violation Report Form

This form is designed to allow the Claimant (person reporting an alleged ethical violation) to file a complaint with the Ethics Committee for an incident that they believe to be a violation of the USA Boccia Code of Ethics or the Members' Code of Conduct. Please refer to the USA Boccia Code of Ethics (2023) to determine if your complaint should be filed with the Ethics Committee, or the Judicial Committee.

When completing this report please provide accurate, specific, factual information using as much detail as you can. Try not to include things you assume, or your opinion. The Ethics Committee will gather information from a variety of sources including information from the Respondent (person(s) being accused) and witnesses. Your accuracy in completing this report will assist the Ethics Committee in their determination of the outcome of the alleged violation.

Background Information:

Claimant - Person re	eporting the all	eged ethical violation		
Last Name:		First Name:		
Phone Number:		Date of Birth:		
USA Boccia Affiliatio	n: Underline o	ne:		
Athlete, Coach, PCA	, Associated T	eam Member, Volunteer, Other (plea	ise explain)	
Email Address:			. ,	
Home Address:				
	Street			
	City	State	Zip Code	
Incident Report: Does this allegation	involve vour co	oncerns about sexual misconduct?	Y	N

Incident Details: Please provide a detailed description of the incident below (i.e., who, what, where, when, why, and how). Describe the incident using fact and if possible, actual quotes of what was said.

Facts about the incident: Date: Time:

Did this incident occur over multiple days? (Y/N) How long have issues of this type been going on?

Location: Some examples are: at local Boccia practice, during competition while traveling, at hotel, on court. Did it occur through electronic communications, social media, or other online platforms?

Where were you when the incident happened?

Describe the actions of the Respondent (person you are accusing of an Ethical Violation) that lead to your filing this Ethical Violation report.

Describe your actions in the course of what occurred. How did you handle the situation?

Did something happen before the incident?

Was there an eyewitness to the incident? How did she/he handle the situation?

Have you had any contact with the Respondent since the incident? If yes, what happened?

Involved Parties

Please list the names of all persons that are aware of the alleged ethical violation.

If you are asking another person to assist you in completing the report form, this person is a Claimant Representative who provides assistance in the securing, reading, and / or completing the Ethical Violation Report Form. The Claimant Representative must read the Confidentiality Agreement found on the USA Boccia website under Governance, Policies and Procedures.

Information about the Respondent(s) – Person(s) you are accusing of the alleged ethical violation Please provide as much information as you can. Last Name: First Name: Phone Number: USA Boccia Affiliation: Underline one: Athlete, Coach, PCA, Associated Team Member, Volunteer, Other (please explain) Approximate age

Information about the Witnesses(s) – Person(s) who are eyewitnesses to the alleged violation Please provide as much information as you can. Last Name: First Name: Phone Number: USA Boccia Affiliation: Underline one: Athlete, Coach, PCA, Associated Team Member, Volunteer, Other (please explain) Approximate age:

If you have more than one witness, please provide the above information in the supporting documentation section.

Supporting Documentation

Please attach any supporting documentation to the report.

Signature of Claimant

Signature of Claimant Representative *

Date _____

Date _____