## APPENDIX VI

## Diocese of Madison Report Form Sexual Abuse by Clergy or Church Employees

This report will be shared with the Bishop of Madison and the Diocesan Sexual Abuse Review Board

Today's date:
Name of person making this report:
Name of abused victim:
Name of sexual abuser:
Dates of occurrence:
Age of victim at time of abuse:
Place(s) sexual abuse occurred:
Status of abuser at time of occurrence:(Bishop, priest, deacon, teacher, religious education coordinator, parish employee, volunteer etc.)
I would be willing to provide details
in writing telephone interview in-person interview
Person sexually abused knows of this report: Yes No
Others who may corroborate this report:
How may we contact you (phone, mail, e-mail)

For information or to speak to the Diocesan Victims Assistance Coordinator, please call Ms. CJ Grahn at 608-821-3162 or e-mail at  $\underline{victimassistance@madisondiocese.org}$ 

Please return this form to:
Diocese of Madison
Attn: CJ Grahn
Victim Assistance Coordinator
702 South High Point Road
Suite 225
Madison, WI 53719

The Diocese of Madison supports the rights of individuals to report abuse directly to the proper public authority.

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