

SEXUAL ASSAULT REPORTING OPTIONS (SARO)

SEXUAL ASSAULT QUESTIONNAIRE

IMPORTANT INFORMATION - Reporting a sexual assault to the NSW Police Force

The New South Wales Police Force (NSWPF) provides two ways for victims to report a sexual assault. **The first and preferred method is to contact your nearest Police Station and make a formal complaint.** A Police Officer will obtain a version of the offence in the form of a statement and arrange medical/counselling support. This may lead to a criminal investigation.

The second option, if you decide not to formally report, is to complete this sexual assault questionnaire. You can handwrite it neatly or type into the questionnaire and mail or email it to the Sex Crimes Squad, State Crime Command at the contact details below. **You can choose to provide your details or report anonymously.**

It is important to note that with the second option you are not making a formal complaint to police to initiate a criminal investigation. By completing this questionnaire, the information gathered may be used to help police develop strategies which target offenders and protect the community and reduce repeat offending. It may also be used to assist in other prosecutions against offenders. Please note that providing answers to any of the questions is optional.

The details you provide on this questionnaire will be recorded on a secure and restricted NSW Police Force data base. Your completed questionnaire will then be kept securely at the office of the NSW Police Sex Crimes Squad.

If you don't know the person/s responsible for the assault upon you and they are identified as a result of you completing this questionnaire you will be discretely and confidentially contacted by a police officer, providing you have supplied your contact details. You will be informed that a person has been identified and asked if you wish to proceed with the matter. If your information was provided by another person, police will contact that person and request them to ask you if you wish to contact or be contacted by police regarding the assault.

If you wish to proceed, you will be asked to provide a comprehensive statement to police about the assault. A suitable time and place will be arranged for this to occur. If a person is charged, the information you have provided in this questionnaire may be used for prosecution purposes. The information will be provided to a Solicitor from the Office of the Director of Public Prosecutions (ODPP) and possibly to the lawyer representing the accused. This is a requirement under what is called 'disclosure'. If the matter proceeds to Court, you may also be asked questions about this questionnaire.

If no person is charged or identified for the assault, your information will remain secured on the NSW Police Force data base and it is unlikely that you will be contacted by police.

If at any stage you wish to make a formal complaint you can by contacting your nearest Police Station.

If this report relates to a child or young person NSW Police, as mandatory reporters, must notify Community Services through the Child Protection Helpline. A mandatory reporter, is a body or organisation that is required to report all risks of significant harm to children in NSW to Community Services.

You also have the option to sign a section of this questionnaire to release the Sexual Assault Investigation Kit (SAIK) to police. If you have had a forensic examination (medical examination where swabs and other physical evidence is collected by a specially trained medical practitioner) the SAIK may contain important evidence. Analysis of the SAIK may provide vital information that could assist in identifying the offender/s.

We understand that completing this questionnaire may be difficult for you as you are being asked to remember, in some detail, what happened. If you are seeing a counsellor it may be useful to talk with them before filling it in so you can prepare a few helpful strategies. When you are planning to complete the questionnaire, try and do it in a place where you feel safe and have some privacy. If you would like to make contact with a counsellor, or any other form of support call the Victims Access Line on 1800 633 063 or Rape Crisis on 1800 424 017. A trained counsellor can discuss your needs and refer you to someone who can help. At the end of this questionnaire, there is a list of victim support and sexual assault support agencies that you may wish to contact.

Please take your time and complete the questionnaire with as much information as you can remember. The more accurate the detail the better. If you cannot answer a question, are uncertain or the question does not relate to your situation, move to the next question.

If you were assisted by another person to complete this questionnaire, they must complete the section at the end of this document..

Email to: SARO@police.nsw.gov.au

**Post to: Sexual Assault Reporting Options
Sex Crimes Squad - State Crime Command
New South Wales Police Force
Locked Bag 5102, Parramatta NSW 2124**

SEXUAL ASSAULT REPORTING OPTIONS (SARO) SEXUAL ASSAULT QUESTIONNAIRE

NSWPF reference #

E

Reporting Agency Name and reference number (if applicable)

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YOUR DETAILS

01 Name (optional)

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02 Gender: Male Female Other (describe)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
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03 Any other names you may be known by (optional)

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04 Date of Birth

dd/mm/yyyy

Age

	Years
--	-------

05 Your residential address at time of offence (optional)

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06 Your current residential address (optional)

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07 Are you willing for police to contact you if required?

YES NO

If Yes, please record your contact numbers and/or email below at question 8.

08 How would you like to be contacted?

Phone

Mobile

Email

Friend

Relative

Support Service

Please include any special instructions (e.g. call after hours, or email contact only etc.)

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SEXUAL ASSAULT REPORTING OPTIONS (SARO) SEXUAL ASSAULT QUESTIONNAIRE

Please provide as much information as you can accurately remember. If you cannot recall or answer a question, go to the next one.

DATE & TIME OF THE OFFENCE

09 When did this assault happen?

Daylight

Darkness

Unknown

Between

dd/mm/yyyy

00:00 (24hrs)

and

dd/mm/yyyy

00:00 (24hrs)

DETAILS OF THE OFFENCE

10 Did you know the offender?

YES NO

If Yes, how and for how long

11 How did you first meet the offender/s?
Please explain

12 Did you communicate with the offender/s online?
(e.g. social networking site, chat room, online dating)

YES NO

If yes, provide details including, email address;
chat room name of offender if known etc

13 Where did you first meet the offender on the day
of the offence/incident?
(e.g. address, business, location)

14 Where did the assault/incident take place?
(e.g. address)

Licensed Premises (provide details)

Private Residence (provide details)

Other (provide details)

15 Where did the assault/incident end?
(e.g. address, business, location)

As per 14 above

Other (provide details)

SEXUAL ASSAULT REPORTING OPTIONS (SARO) SEXUAL ASSAULT QUESTIONNAIRE

DETAILS OF OFFENCE

16 How did the offender assault you?
(Select ALL that apply)

- Vaginal Intercourse
- Anal Intercourse
- Masturbation
- Cunnilingus (licked vagina)
- Anilingus (licked anus)
- Digital (finger) penetration
- Fellatio (oral sex on a male)
- Simulated intercourse
- Fondling/touching
- Kissing
- Foreign object insertion
- Hand/fist insertion
- Stabbing
- Suffocation
- Whipping
- Beating
- Slapping
- Kicking
- Choking
- Pinching
- Hair pulling
- Verbal abuse
- Cutting
- Strangulation
- Shooting
- Burning (describe)

Biting (describe)

Torture (describe)

Physical injuries (describe)

Other (describe)

17 Did the offender ejaculate?

YES NO UNKNOWN

If yes, (specify where)

18 Did you attend a hospital or consult a Doctor as a result of your injuries?

YES NO

If yes, (please provide details below – optional)

SEXUAL ASSAULT REPORTING OPTIONS (SARO) SEXUAL ASSAULT QUESTIONNAIRE

SUMMARY OF INCIDENT

19 Please describe in sequence and detail what happened on the day of the offence. Including, but not limited to:

- How you met the offender
- What happened before the assault
- What happened during the assault
- What you both did and said

- If your clothing was moved/removed, how did this happen
- Were weapons involved or threatened? If so, please describe.

This section is a very important summary of how the assault happened. Please provide as much detail as you can remember.

Please press Tab to continue next page

SEXUAL ASSAULT REPORTING OPTIONS (SARO) SEXUAL ASSAULT QUESTIONNAIRE

SUMMARY OF INCIDENT (CONT'D)

SEXUAL ASSAULT REPORTING OPTIONS (SARO) SEXUAL ASSAULT QUESTIONNAIRE

OFFENDER DETAILS

If more than 1 offender is involved please print or copy pages 5-7 again for each additional offender

20 How many offenders were involved?

This is offender number 1 of offender(s)
involved in this incident

21 Name of offender? (If known)
Surname
Given Name(s)

22 Alias(es) (Nicknames, names used etc.)

23 Gender: Male Female Unknown

24 Date of Birth Unknown
dd/mm/yyyy

OR

Age (or best estimate) Unknown

25 Place of Birth Unknown

26 Offender's residential address at time of offence
(if known)

27 Did the offender say their age?
YES NO
If yes what age?

28 Offender's current residential address (if known)

29 Offender's contact number/s (if known)

Unknown	<input type="text"/>
Phone	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>
Friend	<input type="text"/>
Relative	<input type="text"/>
Other	<input type="text"/>

The following questions relate to the offender's description at the time of the assault

OFFENDER IDENTIFICATION

30 What complexion was the offender?
 Dark Light Tanned
 Other (describe)

SEXUAL ASSAULT REPORTING OPTIONS (SARO) SEXUAL ASSAULT QUESTIONNAIRE

31 What was the racial appearance of the offender?

- Caucasian
- Aboriginal/Torres Strait Islander
- African
- Asian
- Indian Sub-Continent
- South American
- Mediterranean
- Pacific Islander/Maori
- Middle Eastern
- Other (describe)

32 Did the offender speak a language other than English, have an accent or a speech impediment (e.g. stutter)?

YES NO

If yes, please describe

33 How tall was the offender?

34 What was their build?

- Small/Thin
- Medium/Average
- Large/Solid
- Obese

35 What was their weight?

36 Describe the offender's hair including length, colour/shade?

Length

Colour

Describe

37 What colour eyes did the offender have?

38 Did the offender wear glasses (including sunglasses)?

YES NO

If yes, please describe

39 Did the offender's teeth appear unusual (gaps, missing, chipped etc.)?

YES NO UNKNOWN

If yes, please describe

40 What was the offender wearing at the time of the assault?

SEXUAL ASSAULT REPORTING OPTIONS (SARO)

SEXUAL ASSAULT QUESTIONNAIRE

OFFENDER IDENTIFICATION (CONT'D)

- 41 Did the offender have any scars, marks, deformities, piercing or tattoos?

YES NO UNKNOWN

If yes, please describe

- 42 Did the offender have unique physical features such as crossed eyes, noticeable limp, physical deformity, distinctive hairstyle, etc.

YES NO UNKNOWN

If yes, give details

- 43 Did the offender smell of anything?

YES NO

If yes, please describe

- 44 Do you know the offenders current occupation or how they earn money (legal or illegal)

YES NO

If yes, please describe

- 45 How did the offender travel at the time of the offence (walk, drive etc)?

- 46 Was there a vehicle(s) involved during this assault?

YES NO

If yes, please describe

- 47 Did anyone see what happened to you?

YES NO UNKNOWN

- 48 Do you know the name/s of the witness/es?

YES NO

If yes, (can you provide their names - optional)

SEXUAL ASSAULT REPORTING OPTIONS (SARO)

SEXUAL ASSAULT QUESTIONNAIRE

The following questions relate to your description at the time of the assault. Any answers may help police identify patterns of behaviour by offenders, including those particular to certain offenders'

49 What was your gender?
Male Female Transgender

50 What was your complexion?
 Dark Light Tanned
 Other (describe)

51 Your age at the time?

52 Your height and weight?

 cm kg

53 Your build?

- Small/Thin
 Medium/Average
 Large/Solid
 Obese

54 Describe your hair

55 Did you have any unique features?

- nil
 crossed eyes
 noticeable limp
 skin disorder
 tattoo/piercing
 distinctive hairstyle (describe)

physical deformity (specify)

physical disability (specify)

other (describe)

56 Describe your personality (eg loud, shy, withdrawn)?

57 What were you wearing at the time of the assault?

58 Did the offender take any of your clothes with them?

YES NO UNKNOWN

If yes, what?

59 Did you leave any clothes?

(eg drivers licence, purse, personal belongings)

YES NO UNKNOWN

If yes, what?

SEXUAL ASSAULT REPORTING OPTIONS (SARO) SEXUAL ASSAULT QUESTIONNAIRE

60 Did the offender take anything else away?
(eg drivers licence, purse, personal belongings)
YES NO UNKNOWN

If yes, what?

61 Did the offender/s threaten you in any way?
YES NO

If yes, please describe

62 What was your occupation at the time of the assault?

63 Were you affected by any of the following just prior to the assault?

Health issues (explain)

Mental health (explain)

Physical Injury/disability (explain)

Alcohol/Drug (explain)

Other (explain)

Q. How did you first learn about the Sexual Assault Reporting Options process?

- Police
- Poster
- Sexual assault service
- Doctor/GP
- Internet
- Own research

Other (describe)

SEXUAL ASSAULT REPORTING OPTIONS (SARO) SEXUAL ASSAULT QUESTIONNAIRE

IMPORTANT REMINDER

It is important to understand that the completion of this questionnaire does not constitute a formal complaint to the NSW Police Force. If at any point you decide that you want to make a formal complaint you can do so by contacting your nearest Police Station.

I understand that this questionnaire does **NOT** constitute a formal complaint to police

YES NO

Please take the time to check the information you have supplied in the questionnaire to ensure it is complete and accurate.

Signed: (Optional)

.....

Date questionnaire completed:

I have completed this questionnaire as a representative of the victim

Name

Address

Phone Number

Email Address

Was this questionnaire completed in the presence of the victim?

YES NO

Relationship to victim (ie: friend, volunteer, relative, counsellor)

Signed:

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Consent to Obtain Medical Records

If you attended a Sexual Assault Service shortly after the offence was committed and had a forensic examination, the Sexual Assault Investigation Kit (SAIK) may contain important forensic evidence. The examination of this kit could provide valuable information that may help identify the offender/s. Please consider completing the below section, providing your consent to release the SAIK to NSW Police Force.

If you do not know the person responsible for the assault upon you, and they are identified as a result of the SAIK being analysed, if you have included your details, you will be contacted by a police officer and asked if you are willing to proceed with this matter.

CONSENT TO RELEASE SAIK AND INFORMATION TO THE NSW POLICE

I hereby authorise the Hospital

or the examining doctor to release a copy of the Sexual Assault Investigation Kit (SAIK) containing any forensic samples, protocol and any relevant laboratory reports for this reported sexual assault to the New South Wales Police or to the Director of Public Prosecutions, as requested, for examination and legal processes.

Name (print)
Surname Other Names

Signed Date

SEND TO

Mail to: Sexual Assault Reporting Options
Sex Crimes Squad
State Crime Command
New South Wales Police Force
Locked Bag 5102, Parramatta NSW 2124

Email to: SARO@police.nsw.gov.au

SEXUAL ASSAULT REPORTING OPTIONS (SARO)

SEXUAL ASSAULT QUESTIONNAIRE

Victim and Sexual Assault Support Services

- NSW Rape Crisis Centre 1800 424 017 - www.nswrapecrisis.com.au
 - Bravehearts on 1800 272 831 or www.bravehearts.org.au
- Victim Services website: www.lawlink.nsw.gov.au/vs
 - Victims Support Line (Victims Access Line 1800 633 063)
 - Aboriginal Contact Line 1800 019 123
- Helping Victims of Sexual Assault: www.sexualassault.nsw.gov.au
- Sexual Assault Services
Contact via your local hospital or go to www.health.nsw.gov.au/services
- Child Sexual Assault Counselling and support services
 - CASAC (Child & Adolescent Sexual Assault Counsellors) on (02) 9601 3790 or www.casac.org.au
 - Kids Helpline 1800 551800
- Victims Register
 - Department of Corrective Services Victims Register: (02) 9289 1374
 - Department of Juvenile Justice Victims Register: (02) 9219 9400
 - NSW Health Forensic Patients Victims Register: (02) 9391 9302
- Indigenous Women's Legal Contact Line 1800 639 784
- Wirringa Baiya Aboriginal Women's Legal Centre 1800 686 587
- Women's Legal Services NSW
 - Contact Line 1800 801 501
 - Telephone Interpreter Service 13 14 50
- Immigrant Women's Speakout 9635 8022 - www.speakout.org.au
- Criminal Justice Support Network 1300 665 908 (for people with an intellectual disability)