ILLINOIS DEPARTMENT OF CORRECTIONS

PREA Sexual Abuse & Sexual Harassment Self-Report

Name (Print): _____ ☐ Applicant ☐ Promotion Pending
Last First M.I.

Current Facility: _____ Last Four SSN: _____

In accordance with the Prison Rape Elimination Act Standard (115.17) Hiring and Promotion Decisions, any applicant or current employee pending promotion who may have contact with individuals in custody shall be questioned regarding previous misconduct.

Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for ineligibility or termination of employment.

Have you ever engaged in sexual abuse in a prison, jail, lockup, community confinement facility or other correctional facility; a pretrial detention facility; a juvenile facility; a facility for persons who are mentally ill or disabled, or have intellectual disabilities, or are chronically ill or handicapped; facility providing skilled nursing, intermediate or long-term care, custodial or residential care or other institution as defined in the Civil Rights of Institutionalized Persons Act (42 U.S.C. 1997)?

Note: The term "institution" means any facility or institution which is owned, operated, or managed by, or provides services on behalf of any State or political subdivision of a state; including privately owned and operated facilities not deemed excluded. ☐ Yes ☐ No

If yes, explain: _____

_____

Have you ever been convicted of engaging or attempting to engage in sexual activity in the community that was facilitated by force; overt or implied threats of force, or coercion; or if the victim did not consent or was unable to consent or refuse? ☐ Yes ☐ No

If yes, explain: _____

_____

Have you ever been civilly or administratively adjudicated of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☐ Yes ☐ No

If yes, explain: _____

_____

Has there ever been an allegation, complaint or finding made against you regarding any incidents of sexual harassment? ☐ Yes ☐ No

If yes, explain: _____

_____

I certify and affirm, subject to penalty of perjury, that the information provided herein is true and correct to the best of my knowledge.

Signature: _____ Date: _____

Witness: _____ Date: _____