

DISCRIMINATION AND SEXUAL HARASSMENT (DASH) REPORT

(1) INCIDENT DESCRIPTION

- (A) INCIDENT NO:
- (B) DATE REPORTED:
- (C) REPORT TYPE:
- (D) REPORTING SERVICE:
- (E) UIC/MCC:
- (F) POC:
- (G) DATE(S) OF INCIDENT:
- (H) TYPE DISCRIMINATION:
- (I) LOCATION:
- (J) REPORTED THROUGH:
- (K) SENSITIVITY:
- (L) DESCRIPTION OF INCIDENT:

(2) RECIPIENT INFORMATION:

- (A) RECIPIENT #:
- (B) COMPONENT:
- (C) PAY GRADE:
- (D) GENDER:
- (E) RACE/ETHNICITY:
- (F) ALCOHOL USE SUSPECTED:
- (G) RECIPIENT PERSONAL INFORMATION

- (1) LAST NAME:
- (2) FIRST NAME:
- (3) MIDDLE INITIAL:
- (4) SSN:
- (5) DATE OF BIRTH:
- (6) LOCAL ADDRESS:
- (7) CITY:
- (8) STATE:
- (9) ZIP CODE:
- (10) COML PHONE:
- (11) DSN PHONE:
- (12) MARITAL STATUS:
- (13) RELIGION:
- (14) MILITARY/CIVILIAN:

(H) RECIPIENT MILITARY INFORMATION

- (1) MAJOR COMMAND:
- (2) GRADE:
- (3) MOS:
- (4) STATUS:
- (5) DUTY STATUS AT TIME OF INCIDENT:
- (6) ACTIVE DUTY SERVICE DATE:
- (7) ROTATION DATE:
- (8) EAS:
- (9) UIC:
- (10) FUTURE MCC:
- (11) CO NAME/GRADE:
- (12) CO PHONE NUMBER:

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(3) ALLEGED OFFENDER INFORMATION

- (A) ALLEGED OFFENDER #:
- (B) COMPONENT:
- (C) PAY GRADE:
- (D) GENDER:
- (E) RACE/ETHNICITY:
- (F) RELATIONSHIP TO RECIPIENT:
- (G) ALCOHOL USE SUSPECTED:
- (H) ALLEGED OFFENDER PERSONAL INFORMATION
 - (1) LAST NAME:
 - (2) FIRST NAME:
 - (3) MIDDLE INITIAL:
 - (4) SSN:
 - (5) DATE OF BIRTH:
 - (6) LOCAL ADDRESS:
 - (7) CITY:
 - (8) STATE:
 - (9) ZIP CODE:
 - (10) COML PHONE:
 - (11) DSN PHONE:
 - (12) MARITAL STATUS:
 - (13) RELIGION:
 - (14) MILITARY/CIVILIAN:
- (I) ALLEGED OFFENDER MILITARY INFORMATION
 - (1) MAJOR COMMAND:
 - (2) GRADE:
 - (3) MOS:
 - (4) STATUS:
 - (5) DUTY STATUS AT TIME OF INCIDENT:
 - (6) ACTIVE DUTY SERVICE DATE:
 - (7) ROTATION DATE:
 - (8) EAS:
 - (9) UIC:
 - (10) FUTURE MCC:
 - (11) CO NAME/GRADE:
 - (12) CO PHONE NUMBER:

(4) INCIDENT DISPOSITON/RESOLUTION:

- (A) DATE ACTION COMPLETED:
- (B) CLOSURE CODE:
- (C) ACTION TAKEN:
- (D) TRIAL RESULTS:
- (E) MILITARY SENTENCE:
- (F) CIVILIAN SENTENCE:
- (G) CONVENING AUTHORITY APPROVAL:

(5) WITNESS PERSONAL INFORMATION

- (A) WITNESS NO:
- (B) LAST NAME:
- (C) FIRST NAME:
- (D) MIDDLE INITIAL:
- (E) GENDER:
- (F) REQUESTS ANONYMITY:
- (G) COMPONENT:

DISCRIMINATION AND SEXUAL HARASSMENT (DASH) REPORT

- (H) GRADE:

- (I) LOCAL ADDRESS:
- (J) CITY:
- (K) STATE/COUNTRY:
- (L) ZIP:
- (M) PHONE:
- (N) DSN:
- (O) RELATIONSHIP TO RECIPIENT:
- (P) MILITARY/CIVILIAN: