Instructions for Using the Permission to Contact (PTC) Form A Referral for Helping MSU Community Members Experiencing Relationship Violence and Sexual Misconduct (RVSM)

What should I do if someone tells me they have experienced relationship violence, stalking, sexual harassment or sexual assault? (MSU refers to all four of these issues as RVSM.)

- Do not underestimate the potential physical danger that they might be in.
- Do not blame the person for the abuse they have experienced.
- Recognize the courage it takes for someone to share something so personal.
- Respect their confidentiality.
- Offer the person information about on-campus resources.

How can I help the person connect with on-campus resources?

- FOR RELATIONSHIP VIOLENCE OR STALKING: If it is safe to do so, give the person a business card, brochure, website, or contact information for MSU Safe Place: http://safeplace.msu.edu, noabuse@msu.edu, or 517-355-1100.
- FOR SEXUAL ASSAULT OR SEXUAL HARASSMENT: Give the person a business card, brochure or contact information for the MSU Center for Survivors: http://centerforsurvivors.msu.edu for Crisis Chat; 517-372-6666 (24/7 crisis hotline); 517-355-3551 (program business line).
- Let them know that all services at these two programs are free and confidential.
- Offer to call these programs while the person is with you.
- Encourage the person to leave a message, with contact information, if they get voice mail at any time when calling Safe Place or Center for Survivors.
- Suggest that the person signs the Permission to Contact form.

Using Permission to Contact Forms

- The Permission to Contact form gives Safe Place or Center for Survivors staff permission to make contact with the person signing the form to offer safety planning, advocacy, counseling, shelter, and/or support services.
- Anyone in the MSU community experiencing RVSM can sign the form. They are <u>not</u> required to sign the form, unless they want to be contacted by one of these confidential, supportive programs.
- The person signing the form may designate how they wish to be contacted. They are not obligated to meet with Safe Place or Center for Survivors staff, even if they sign the form.
- Once the form is completed, you may send it via email or fax to:
 - MSU Safe Place, noabuse@msu.edu or fax: (517) 432-6193
 - o MSU Center for Survivors, sapstaff@msu.edu or fax: (517) 353-8912
- For additional *Permission to Contact (PTC) forms*, call either program or go to their websites

Safe Place and Center for Survivors thank you for taking time to read this instruction sheet and for familiarizing yourself with the *Permission to Contact form*.

MSU Safe Place

Confidential Program
Relationship Violence and Stalking:

msu Safe Place

MSU Center for Survivors

Confidential Program
Sexual Assault/Sexual Harassment:



517) **355-1100** (program business line) (517) **432-9570** or **353-9999** (Advocacy)

Fax: 517-432-6193 http://safeplace.msu.edu Email: noabuse@msu.edu (517) **355-3551** (program business line) (517) **372-6666** (24/7 hotline)

Fax: 517-353-8912

Crisis Chat at centerforsurvivors.msu.edu

Email: sapstaff@msu.edu

PERMISSION TO CONTACT FORM

You have been given this form because someone has concerns for your safety and well-being. While you can always make contact with MSU Safe Place or the MSU Center for Survivors staff directly by using the contact information above, another way for you to receive free services, support and information is to give permission for a Safe Place or Center for Survivors representative to contact you. Signing this form does not commit you to use these services or to even talk with someone from either program, but it does mean someone will contact you to see what you need. We will do everything we can to ensure your safety and honor your privacy as we try to contact you. Working with Safe Place or Center for Survivors does not mean you have to end current relationships, contact police, initiate legal proceedings, or make a complaint with the Office of Institutional Equity, since that may not be what you want. We want you to be safe, get support and know your options and rights.

Only the person giving you this form, and the staff at MSU Safe Place and/or MSU Center for Survivors, will see this confidential form. Please sign and *return the form below* to the person who gave it to you, *or send it* to the email address or fax below.

(Please print clearly):	(Checking this is optional):
My Name:	I give permission to the person who gave me this form to tell Safe Place/Center for Survivors about my situation.
Email:	Pronoun: She/Her/Hers He/Him/His
Address:	They/Them/Theirs
Taking into consideration my privacy and safety, you may (Check all that apply) Phone With a message that you are from Safe Place or Ce With a message with only your first name and phor Do NOT leave a message E-mail Contacting the person who gave me this form, or som I trust to be able to get in contact with me safely: Support person's name: Relationship to me: Phone: Email:	For Relationship Violence or Stalking, return form to: MSU Safe Place Email: noabuse@msu.edu Fax: (517) 432-6193 * For Sexual Assault or Sexual Harassment return form to: MSU Center for Survivors 556 E. Circle Drive, Suite 207 Student Services Bldg. East Lansing, MI 48824
I authorize the MSU Center for Survivors or MSU Safe Place	* Note: faxes come directly into
Signature: [Date: confidential program offices