CARE NETWORK

How to Create Public Reports

Go to:

- Navigate to the [Montclair State University Online CARE Report](https://montclair-advocate.symplicity.com/care_report/) (https://montclair-advocate.symplicity.com/care_report/)

Online Care Report/Student of Concern Form: I am a –

- Select from the drop down menu: Faculty/Staff, Student or Community Member

Online CARE Report

ⓘ When completing a CARE/ Student of Concern report please be sure to be as specific and detailed as possible and include any information that you think is important for the staff to know. If you think the student is an immediate danger to self or others please contact University Police immediately at (973) 655-5222.

Please note that the system may refresh depending on your selection

* indicates a required field

Student of Concern Form

IF THIS IS AN EMERGENCY PLEASE CONTACT UNIVERSITY POLICE AT (973) 655-5222. If you believe that the student is an immediate danger to self or others please contact University Police.

I am a *

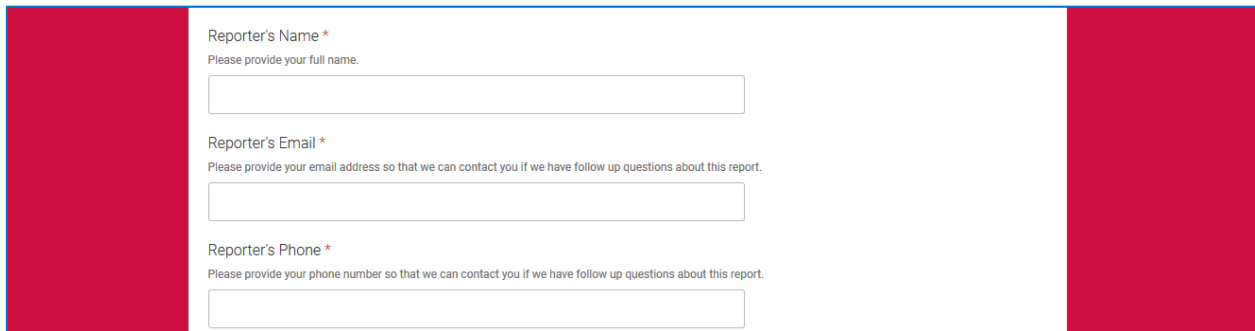Please indicate your relationship to Montclair State University

Faculty/Staff: Employed as a professional or Faculty role at the University.

Student-currently registered student.

Community Member–an individual who is not Faculty, Staff nor Student of Montclair State University (i.e. parents, alumni, etc..).

Reporter's Name, Email, and Phone:
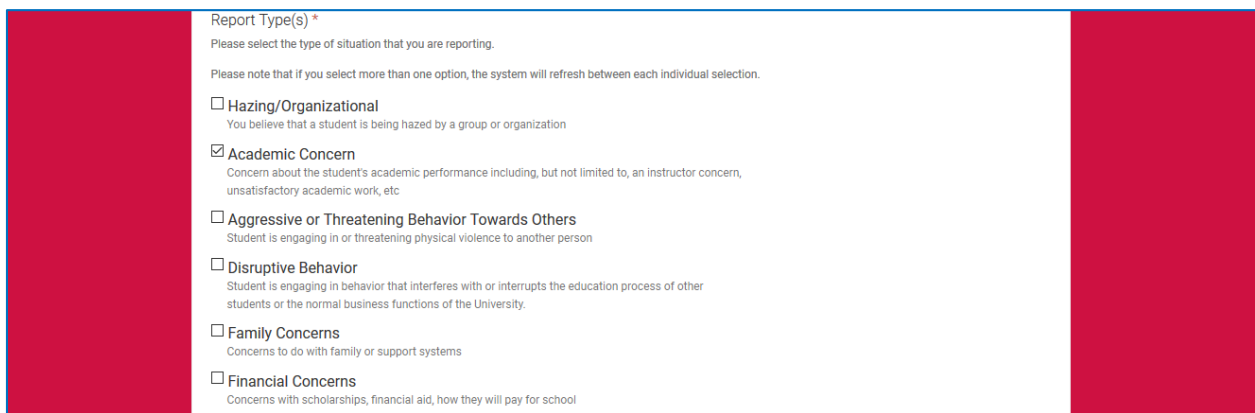
- Please provide your name, email, and phone

Report Type(s):

- Select areas of concern (each area of concern provides an explanation). Please select the type of situation that you are reporting.

  Please note that if you select more than one option, the system will refresh between each individual selection.

Date, Time, and Location:

- **Date and Time-** List the date and select the approximate time when the incident took place, from the drop down menu

Date, Time and Location

Date/Time of Incident

What was the date and approximate time that the situation occurred?

SELECT | CLEAR | CLEAR

- **Location-** Click on <u>Choose</u> and select from the list of buildings (name of location where the incident took place)

Location

Please provide the location of the incident. Please use the side arrows for refined results with provided with the option.

If the incident occurred on-campus, but is not listed, please select "**Other-On Campus**" and then provide the location details in "Additional Location Information".

If the incident occurred off-campus, please select "**Off-Campus**" then provide the location details in "Additional Location Information".

CHOOSE...

Additional Location Information-

- If applicable, please provide any additional location details (for example: in the 3rd floor lobby)

Additional Location Information

If applicable, please provide any additional location details (for example: in the 3rd floor lobby).

Student(s) Involved:

- List students involved. Please provide as much personal identification as possible (the names, CWID, class year, emails if possible of the student(s) involved in this situation)
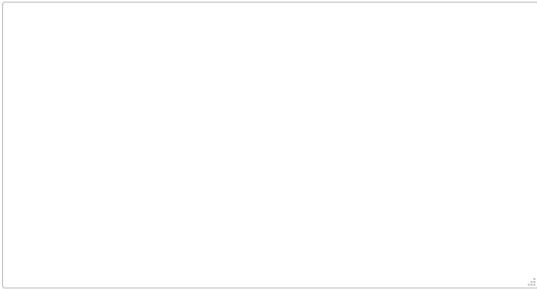
Incident Information:

- Provide a thorough description of the incident(s)

Supporting Documents:

- If you have any videos, pictures, etc… (Please attach them)

Anonymous:

- Answer **Yes** or **No** (regarding if you want to remain anonymous or not)

Anonymous Report *

Would you like to remain anonymous? Please note by remaining anonymous, it may hinder the University's response in assisting this student.

○ Yes ○ No

Submitting a Report:

- Please note that each report is reviewed by a member of the University staff. Based on the report the staff may not be able to disclose the outcome of the outreach.
  - Click on the **Verification Box**- (I'm not a robot)
  - Click **Submit**

Submitting a Report

Please note that each report is reviewed by a member of the University staff. Based on the report the staff may not be able to disclose the outcome of the outreach.

Verification *

Please enter the verification code that appears below. Click the link below the image to hear the code read aloud.

☐ I'm not a robot
reCAPTCHA
Privacy - Terms

SUBMIT