



SOBI Referral Form

SOBI referrals are for non-life-threatening reports. If this is an immediate emergency, dial **911** or call the Collin College Police Department at **972.578.5555**.

Members of the Collin College community may file a SOBI referral regarding a Collin College student via this form. For reports regarding a Collin College faculty or staff member, contact the Human Resources Office (HR) directly at 972.758.3856.

You can submit an anonymous SOBI referral; however, doing so may limit SOBI’s ability to follow-up, complete a thorough investigation, and address the concerning behavior(s).

You must download this form and save it to your computer before filling it out in order for the information to save correctly. Once you have completed this form, it should be submitted through email along with any supporting documentation to sobi@collin.edu.

SOBI referrals are only monitored during regular office hours (i.e., Monday through Friday 8:00 a.m. to 5:00 p.m.). Referrals made after 5:00 p.m., on weekends, or during Collin College closings or holidays will be responded to the next business day.

If you do not hear from a SOBI member within 2 College District business days (i.e., Monday through Friday) of submitting a referral, send an email to sobi@collin.edu inquiring about the status of your referral.

SOBI actions are not a substitute for disciplinary procedures. If SOBI determines there has been an alleged violation(s) of the *Student Code of Conduct*, your referral will be submitted to the Dean of Students Office for disciplinary action.

If you are unsure whether you should submit a referral to SOBI or an incident report to the Dean of Students Office, contact SOBI at sobi@collin.edu or the Dean of Students Office at 972.881.5604 or dos@collin.edu for clarification.

Disciplinary action may be taken against anyone who submits a false SOBI referral or provides false information. In addition, Collin College prohibits retaliation against anyone who submits a SOBI referral in good faith.

SOBI records are protected by the *Family Educational Rights and Privacy Act of 1974 (FERPA)*. Therefore, any information regarding the outcome of this referral will not be shared with you without the direct written consent of the student(s) involved.

If you have any questions regarding submitting a SOBI referral, contact SOBI at sobi@collin.edu.

Information for Person Submitting Referral

If you would prefer to remain anonymous, skip this section and go to the “Incident Information” section below.

CWID:

Name:

Position Title:

Phone Number:

Collin College Email Address:

Campus Location:

How would you prefer to receive follow-up?

Incident Information

Date of Incident:

Time of Incident:

Nature of Incident:

Urgency of Referral:

Location of Incident:

*If "Other" is selected, list the exact location(s):

Student(s) Involved

Name:

CWID:

Dual Credit/Home School Student:

Name:

CWID:

Dual Credit/Home School Student:

Name:

CWID:

Dual Credit/Home School Student:

Name:

CWID:

Dual Credit/Home School Student:

Description of Incident

Provide a detailed description of the incident using specific concise, objective language.

Police Response

Did police respond?

Was a police report filed?

Witnesses

List any witnesses who were present or have knowledge of the incident.

Others Notified

List anyone else you have notified (e.g., associate academic dean, academic/workforce dean, agency, department, program director, supervisor, etc.).
