

# FULL Sexual Assault Incident Response Oversight (SAIRO) Report

This report is a one-time requirement for each Unrestricted Report or Independent Investigation of a sexual assault. DO NOT include photographs, Personal Identifiable Information (PII), demographic, or incident information that could reasonably lead to the identification of victim or subject.

---

SUBJECT: SAIRO Report

DATE

Preliminary information on an incident of sexual assault will be obtained from the MCIO or CLE and will include at a minimum:

## VICTIM DATA

## SUBJECT DATA

Gender	Rank or Grade	Gender	Rank or Grade		
Category		Category			
State NG Membership	Service Affiliation	Command Level	State NG Membership	Service Affiliation	Command Level

---

## INCIDENT DATA

Most serious SA offense under investigation

Location of Incident

Date of Incident

Time of Incident

Date Referred to SARC/VAC/VA

Date DD Form 2910 Signed

Date DD Form 2910 Filed by SARC

Subject Action

Date submitted to TAG

Date submitted to GO

Other relevant non-PII information pertaining to the Subject

---

## ADVOCACY SERVICES

Eligible for SAPR Services:

Information Entered into DSAID within 48 hours:

EO services and support offered

Circumstances that adversely affect command's ability to address victim's needs:

VICTIM'S COMMANDER INPUT

Date of next CMG Meeting

---

HEALTHCARE

(DO NOT INCLUDE PII or Individually Identifiable Health Information)

If Victim is eligible and has requested an LOD, provide the date the services below were offered:

Date LOD Initiated

Medical Care:

Mental Health:

Sexual Assault Forensic Exam (SAFE):

---

INVESTIGATION

MCIO or CLE Case Number

Provide a brief explanation if no case number has been assigned:

Date MCIO or CLE notified:

If applicable, does victim have a DD 2701:

---

SAFETY

Date Safety Assessment was conducted

Was HRRT\* assembled

Date Victim was given information regarding MPOs and CPOs

If applicable: Date MPO Issued

Date CPO Issued

\*High-Rick Response Team (HRRT)

---

EXPEDITED TRANSFERS

Date Victim received expedited transfer information

Victim requested expedited transfer

Date expedited transfer requested

Date Expedited Transfer Received

Expedited Transfer Status (if applicable)

---

LEGAL SERVICES

Date Victim informed of SVC Services:

Was Victim informed of the role of the SVC?

Did Victim provide written consent for disclosure of privileged communication?

Were SVC services offered prior to written consent?