Statement-Taking Forms
INTerview Details:

1. Interview Date ______________

2. In which project area was this statement taken? (Circle one)
   - Minnesota
   - Chicago
   - Philadelphia
   - Atlanta
   - DC/Maryland
   - New York
   - Ghana
   - Providence
   - Other: ____________________________

3. Location (including city/state) ___________________________________________
   Example: Brooklyn Park Central Library, Brooklyn Park, MN

4. Interview Start Time __________  5. End Time _________________

6. Names of Statement-Takers ____________________________________________

7. Language in Which the Statement Was Taken ____________________________

8. Was an interpreter used? Yes No
   If yes, Name: __________________________

9. Was disclosure statement read to interviewee? Yes No

10. Did interviewee request consultation with a lawyer prior to giving statement? Yes No
    Referred to: __________________________

11. Does the statement-giver want their statement to be anonymous (i.e. we will not associate their name/contact info in connection with their statement)? Yes No

Statement Taker's Observations:

INTERVIEW DETAILS FORM
Important Information about Giving a TRC Statement

Thank you for giving your statement today. You are playing an important role in helping Liberia to heal and build a better future. Giving a TRC statement is a chance for you to tell YOUR story. As volunteers we are here to help you do that. We are honoured that you are willing to share your experiences with us. If at any time you do not want to answer a question, want to end the interview or need to take a break, please do not hesitate to tell us.

What will happen to your statement after you give it:

- The volunteers taking your statement will not give any identifying information about you or what you say to the media or other members of the public.
- All of the statements taken in the U.S. will be gathered in a confidential manner and entered into a password-protected database; every effort will be made to safeguard the confidentiality of the information contained in the statements.
- When statement-taking in the U.S. is completed all the information in the database will be sent to the TRC in Liberia along with a final report summarizing Minnesota Advocates' findings.
- The TRC in Liberia will conduct investigations into information from statements, will hold public hearings, and will write a final report that will be submitted to the government and people of Liberia.
- The archives of the TRC shall remain in the public domain except those records or documents classified by the TRC as “confidential” which shall remain classified for 20 years following the retirement of the TRC.
- If you have any concerns about your name being linked to your statement for any reason, you should give an anonymous statement, meaning that no individually identifying information about you will be included with your statement. Less weight may be given to anonymous statements.

Volunteers: The volunteer statement taker is not your lawyer. The volunteers are not being paid.

Immigration issues: The volunteer statement takers cannot give you immigration advice. If you have any concerns about potential immigration consequences of giving a statement, you should talk to your immigration lawyer first. If you don’t have an immigration lawyer, we will attempt to provide a referral or have someone call you to follow up.

Amnesty from prosecution: Minnesota Advocates for Human Rights does not have the power to grant amnesty from prosecution to anyone.

Mental health questions: Counselors, pastors, and others trained in helping survivors of trauma have volunteered to talk with statement givers who want to debrief after their statement. We can give you a referral or have someone call you to follow-up.

I understand the information above and I promise to provide an accurate and truthful statement to the best of my knowledge and recollection.

_______________________________________________________________
Print your Name (do not print if this is an anonymous statement)

_______________________________________________________________
Sign your Name (do not sign if this is an anonymous statement) Date

Statement-giver did not sign, but made a verbal attestation.

________________________ (statement-taker's initials)

IMPORTANT INFORMATION FORM
Please review part 1 of this checklist with the statement giver at the beginning of the interview.
Please review both parts 1 and 2 at the end of the interview.

1. How do you want your statement treated?
   *Please check off all options that apply.*

   - [ ] I choose to give an anonymous statement. My name and contact information will not be included with my statement. I am aware that the TRC may give my statement less weight because it is anonymous.
   
   --- OR ---

   - [ ] I choose to provide my name and contact information to the TRC for purposes of its investigation and analysis. I understand the archives of the TRC shall remain in the public domain except those records or documents classified by the TRC as “confidential” which shall remain classified for 20 years following the retirement of the TRC. However:
     - [ ] I do not want my name released in the TRC’s final report.
     - [ ] I do not want to testify at a public hearing in Liberia.
     - [ ] I do not want to testify at a public hearing in the United States.
     - [ ] I want my statement to remain “confidential” as described above.

2. What kind of follow-up would you like?
   *Please check off all options that apply.*

   - [ ] I have questions about my immigration status and would like an immigration attorney to call me for a brief consultation.

   - [ ] I would like to talk with someone about the memories and emotions that have come up during the statement giving process. Please have a trained counselor call me.

   - [ ] I have general questions about the TRC Project. Please have a staff member from Minnesota Advocates for Human Rights call me.

   - [ ] I DO NOT want to be added to Minnesota Advocates for Human Rights email and mailing lists related to the TRC.

If you are giving an anonymous statement but would like a follow-up, please enter a phone number or email address below. This information will not be connected with your statement.

Tel/Email: ____________________________________________
STATEMENT GIVER’S PERSONAL INFORMATION: CONTACT

(Do not complete this form for anonymous statements)

1. First Name____________________________________________________________
2. Middle Name(s) ________________________________________________________
3. Last Name _____________________________________________________________
4. Generation (Jr., Sr., III) _________________________________________________
5. Any other Name (nickname, combat name, alias)
   _______________________________________________________________________
6. Date of Birth:  Month: _______ Day: _______ Year: ______
7. Telephone Numbers:
   Work: _________________________________________________________________
   Home: _________________________________________________________________
   Mobile: ________________________________________________________________
8. Address: ____________________________________________ Street ____________
   ____________________________________________   Apartment # ________________
   City __________________________ State _____ Zip __________
9. Email address: _________________________________________________________
10. Other contact information or persons that would enable the TRC to contact you if more
    information is needed (Name, address, telephone, relationship to statement-giver):
    _______________________________________________________________________

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PERSONAL INFORMATION FORM
STATEMENT GIVER'S PERSONAL INFORMATION: DEMOGRAPHICS

(COMPLETE FOR ALL STATEMENT GIVERS)

1. Sex: [select one]
   - □ Male
   - □ Female

2. Marital Status: [select one]
   - □ Married
   - □ Widowed
   - □ Single
   - □ Separated
   - □ Divorced
   - □ Other
   - □ Did not wish to respond

3. When did you leave Liberia: Month: ________ Year: ________

4. When did you arrive in the United States: Month: ________ Year: ________

5. What is your COUNTY of Origin [select one]
   - □ Bomi
   - □ Bong
   - □ Gbarpolu
   - □ Grand Bassa
   - □ Grand Cape Mount
   - □ Grand Gedeh
   - □ Grand Kru
   - □ Lofa
   - □ Margibi
   - □ Maryland
   - □ Montserrado
   - □ Nimba
   - □ River Cess
   - □ River Gee
   - □ Sinoe
   - □ Not Liberian
   - □ Did not wish to respond

6. What is your tribe/ethinicity: [select one]
   - □ Bassa
   - □ Belle
   - □ Congo/Americo Liberian
   - □ Dei
   - □ Gbandi
   - □ Gio
   - □ Gola
   - □ Grebo
   - □ Kisi
   - □ Kpele
   - □ Krahn
   - □ Kru
   - □ Lorma
   - □ Mano
   - □ Mandingo
   - □ Mende
   - □ Sarpo
   - □ Vai
   - □ Multiple tribes
   - □ Other tribe
   - □ Did not wish to respond

7. What is your education level: [select one]
   - □ No Education
   - □ Elementary
   - □ Junior High
   - □ High school
   - □ College student
   - □ College graduate
   - □ Post graduate
   - □ Other
   - □ Did not wish to respond

Do not record day. Please enter 01 in day field in database.