



# 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 \_\_\_\_\_

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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:**



### **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.

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**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)



*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 #

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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):

\_\_\_\_\_



## STATEMENT GIVER'S PERSONAL INFORMATION: DEMOGRAPHICS

### (COMPLETE FOR ALL STATEMENT GIVERS)

1. Sex: [select one]

- Male  Female

2. Marital Status: [select one]

- Married  Widowed  Did not wish to respond  
 Single  Separated  
 Divorced  Other

3. When did you leave Liberia: Month: \_\_\_\_\_ Year: \_\_\_\_\_

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

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

5. What is your **COUNTY** of Origin [select one]

- |   |                                      |  |
|---|--------------------------------------|--|
| <input type="checkbox"/> Bomi             | <input type="checkbox"/> Lofa        | <input type="checkbox"/> River Gee               |
| <input type="checkbox"/> Bong             | <input type="checkbox"/> Margibi     | <input type="checkbox"/> Sinoe                   |
| <input type="checkbox"/> Gbarpolu         | <input type="checkbox"/> Maryland    | <input type="checkbox"/> Not Liberian            |
| <input type="checkbox"/> Grand Bassa      | <input type="checkbox"/> Montserrado | <input type="checkbox"/> Did not wish to respond |
| <input type="checkbox"/> Grand Cape Mount | (Monrovia)                           |  |
| <input type="checkbox"/> Grand Gedeh      | <input type="checkbox"/> Nimba       |  |
| <input type="checkbox"/> Grand Kru        | <input type="checkbox"/> River Cess  |  |

6. What is your tribe/ethnicity: [select one]

- |  |                                   |  |
|--|-----------------------------------|--|
| <input type="checkbox"/> Bassa                     | <input type="checkbox"/> Grebo    | <input type="checkbox"/> Mende                   |
| <input type="checkbox"/> Belle                     | <input type="checkbox"/> Kissi    | <input type="checkbox"/> Sarpo                   |
| <input type="checkbox"/> Congo/Americo<br>Liberian | <input type="checkbox"/> Kpele    | <input type="checkbox"/> Vai                     |
| <input type="checkbox"/> Dei                       | <input type="checkbox"/> Krahn    | <input type="checkbox"/> Multiple tribes         |
| <input type="checkbox"/> Gbandi                    | <input type="checkbox"/> Kru      | <input type="checkbox"/> Other tribe             |
| <input type="checkbox"/> Gio                       | <input type="checkbox"/> Lorma    | <input type="checkbox"/> Did not wish to respond |
| <input type="checkbox"/> Gola                      | <input type="checkbox"/> Mano     |  |
|  | <input type="checkbox"/> Mandingo |  |

7. What is your education level: [select one]

- |                                       |   |  |
|---------------------------------------|---|--|
| <input type="checkbox"/> No Education | <input type="checkbox"/> College student  | <input type="checkbox"/> Did not wish to respond |
| <input type="checkbox"/> Elementary   | <input type="checkbox"/> College graduate |  |
| <input type="checkbox"/> Junior High  | <input type="checkbox"/> Post graduate    |  |
| <input type="checkbox"/> High school  | <input type="checkbox"/> Other            |  |