

CSA CRIME INCIDENT REPORT FORM



This form should be completed by those individuals identified as "Campus Security Authorities" who are required to report information they receive about specified crimes (described below) pursuant to the federal *Clery Act*. The information collected from these forms will be used to prepare a compilation of statistical information that will be included in the campus Annual Security Report. It is the policy of the MCCCD College Police to ensure that victims and witnesses to crime are aware of their right to report criminal acts to the police. However, if a reporting person requests anonymity, this request must be honored to the extent permitted by law. Accordingly, no information should be included on this form that would personally identify the victim without his/her consent.

Campus police will use this form to determine the category of crime and location under which the crime should be reported according to the requirements of the *Clery Act*. Please forward this completed form to the Police Commander at the CGCC Public Safety Office.

Campus Security Authority Completing Report: Your Name: _____ Phone Number: _____ Report Made By: ____ Victim Victim's name (with victim consent):_____ Third Party (please identify relationship to victim): Type of Incident being reported: Murder Sexual Offense Forcible Sex Offense Non-Forcible Robbery Aggravated Assault Burglary Motor Vehicle Theft Arson Weapons Law Violation Liquor Law Violation ____Drug Law Violation ____Drug Law Referral ____Liquor Law Referral Weapons Law Referral Date and Time Incident Occurred:_____ Description of the Incident/Crime:

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Location of Incident (identify building name, room number, address, etc.; be as specific as possible):
The location where this incident occurred was:
On campus
Off campus affiliated property (owned, controlled, or affiliated with the campus)
Off campus public property immediately adjacent to campus
Unknown
Sex Offenses Examples of sex offenses are rape, sodomy, sexual assault with an object, fondling, incest, and statutory rape.
If the crime was a sexual offense:
Were the victim and the assailant known to each other? Yes No
Were either the victim or the assailant under the influence of alcohol or drugs?
Victim: alcohol - Yes No drugs - Yes No
Assailant: alcohol - Yes No drugs – Yes No
Hate Crimes Hate crime information is required to be reported for each of the following crimes: criminal homicide, sex offense, robbery, aggravated assault, burglary, motor vehicle theft, arson, larceny-theft, simple assault, intimidation, or destruction, damage, or vandalism of property, and for any other crime involving bodily injury.
Was this incident motivated by hate or bias? Yes No
If yes, identify the category of prejudice: Race Ethnicity National Origin Gender Religion Disability Sexual Orientation Gender Identity
If yes, provide a brief explanation of the determination:
To your knowledge, has this crime been reported to another police agency:YesNo
If Yos, do you know what agency: