DSPT CRIME INCIDENT REPORT FORM

To be completed by a Campus Security Authority

Please use this form (complete both pages) to report the required information about specified crimes (listed below) pursuant to the Federal Clery Act. The information collected from these forms is used to prepare a compilation of statistical crime information for inclusion in the School’s Annual Campus Crime Report.

DSPT policy provides that victims and witnesses to crime must be made are aware of their right to report criminal acts to the police, and to report school policy violations to the appropriate office e.g., student conduct violations to the Academic Dean. 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 or her consent. The legislation requires that records or actions related to the crime or incident statistic be retained for seven years.

The School will use this form to determine the category of the crime or incident and the location under which the incident should be reported according to the requirements of the Clery Act. Please forward this completed form to the current CSA.

Name of Campus Security Authority: _______________________________________________

Phone Number: __________________________ Date of report: ___________________

Report made by: ______ Victim

______ Third Party (specify relationship to victim) ____________________

Type of incident: □Homicide □Sex Offense □Robbery □Aggravated Assault

□Burglary □Motor Vehicle Theft □Arson

□Drug/Alcohol/Weapon

Description of the incident or crime: ________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

Did the victim or other involved party make a police report? ______ Yes ______ No

Location of the incident or crime (be as specific as possible): ________________________________

_____________________________________________________________________________
Sex Offenses
Examples of sex offenses are rape, sodomy, sexual assault with an object, fondling, incest, and statutory rape.

Was this crime a sexual offense? ______ Yes ______ No
Was it a rape or attempted rape? ______ Yes ______ No
If yes to either, were the victim and the assailant acquainted? ______ Yes _____ No
If yes, were either the victim or the assailant under the influence of alcohol or drugs?
Victim: Yes, alcohol _____ Yes, drugs ______
Assailant: Yes, alcohol _____ Yes, drugs ______

Hate Crimes
Hate crime information is required to be reported for criminal homicide, sex offense, robbery, aggravated assault, burglary, motor vehicle theft, arson, and any other crime involving bodily injury.

Was this crime motivated by hate or bias? ______ Yes _____ No
If yes, identify the category of prejudice:
  □ Race       □ Ethnicity       □ National Origin
  □ Religion    □ Disability     □ Sexual Orientation
If yes, provide a brief explanation of the determination: __________________________________________

Alcohol, Drug and Weapons Law Violations:
Check all that apply
  □ Alcohol       □ Drugs       □ Weapons
If alcohol, drugs or weapons were involved, provide a brief description: ____________________________

Number of individuals arrested or referred for GTU disciplinary action: _________________________