## City Colleges of Chicago Campus Security Authority Incident Report Form

Use this Campus Security Authority (CSA) Incident Report Form to document as much of the incident as the victim can recall. **Exclude the victim's identity if confidentiality is requested**. The awareness of the incident can come from a direct report, a student or staff member or from a third party. City Colleges of Chicago Safety and Security Department will use the submitted information to verify the appropriate classification of the crime.

PLEASE FILL OUT ALL RELEVANT FIELDS

## 

## Select the category that best fits the description of the crime you are reporting:

| 0 | <b>Homicide</b> – Murder, Non-negligent Manslaughter, and Negligent Manslaughter  |  |  |  |  |
|---|---|--|--|--|--|
| 0 | <b>Assault-Aggravated</b> – The unlawful attack upon another with intent to inflict great bodily harm.  |  |  |  |  |
| 0 | Sexual Assault- Rape, Fondling, Incest or Statutory Rape Were the victim and offender acquainted? (Check appropriate box)   |  |  |  |  |
|   | O Yes   |  |  |  |  |
|   | O No  |  |  |  |  |
|   | O Unknown   |  |  |  |  |
| 0 | <b>Burglary</b> – The unlawful entry into a structure to commit a felony or theft.  |  |  |  |  |
| 0 | <b>Robbery</b> – The taking/attempting to take something by force, violence, threat, or by putting victim in fear.  |  |  |  |  |
| 0 | Motor vehicle theft – The theft of automobiles, trucks, etc., including "joyriding" by a person(s) without lawful authority.  |  |  |  |  |
| 0 | <b>Arson</b> – The willful or malicious burning or attempt to burn, with or without intent to defraud, a dwelling house, public building, motor vehicle or aircraft, personal property of another, etc. |  |  |  |  |
| 0 | <b>Liquor Law Violations-</b> The underage possession, consumption or distribution to minors. (Check appropriate action)  |  |  |  |  |
|   | O Arrest  |  |  |  |  |
|   | O Student Referral  |  |  |  |  |
| 0 | <b>Drug Law Violatio</b> n- The use, possession or distribution of controlled substances; or possession of drug paraphernalia. (Check appropriate action)   |  |  |  |  |
|   | O Arrest  |  |  |  |  |
|   | O Student Referral  |  |  |  |  |

| O  | (Check appropriate action)   |  |  |  |
|--|--|--|--|--|
|  | O Arrest   |  |  |  |
|  | O Student Referral   |  |  |  |
|  |  |  |  |  |
| 0  | <b>Hate crime-</b> The criminal offense that manifests evidence that the victim was intentionally selected because of the perpetrator's bias (race, gender, gender identity, religion, sexual orientation, ethnicity, national origin, or disability) against the victim. Criminal offenses associated with Hate Crimes are: |  |  |  |
|  | Murder and Non-negligent Manslaughter  |  |  |  |
|  | • Sexual Assault   |  |  |  |
|  | • Robbery  |  |  |  |
|  | Aggravated Assault   |  |  |  |
|  | <ul><li>Burglary</li><li>Motor Vehicle Theft</li></ul>   |  |  |  |
|  | <ul><li>Motor venicle Their</li><li>Arson</li></ul>  |  |  |  |
|  | Alson  |  |  |  |
| 0  | In addition to those offenses, the following offenses can be reported as a Hate Crime if they were motivated by the perpetrator's bias.  • Larceny-Theft • Simple Assault • Intimidation • Destruction/Damage/Vandalism of Property  |  |  |  |
| O Violence Against Women Act (VAWA) Offenses- VAWA includes: |  |  |  |  |
|  | Dating Violence  |  |  |  |
|  | Domestic Violence  |  |  |  |
|  | • Sexual Assault   |  |  |  |
|  | • Stalking   |  |  |  |
| O Other crimes: (Specify)                                    |  |  |  |  |
|  |  |  |  |  |
| To your knowledge, was law enforcement notified?             |  |  |  |  |
| 0  | Yes  |  |  |  |
| 0  | No   |  |  |  |
|  |  |  |  |  |

|           | Agency Notification Information:         |                       |                            |                  |
|-----------|--|-----------------------|----------------------------|------------------|
|           | Agency:                                  | Date:                 | Time:                      |                  |
|           | Person/Officer Notified:                 | Phor                  | e Number:                  |                  |
|           |  |                       |                            |                  |
| Wa        | as the crime reported to you by the      | victim or thir        | ed party?                  |                  |
|           | O Victim                                 |                       |                            |                  |
|           | O Third Party                            |                       |                            |                  |
| If T      | nird Party, please provide:              |                       |                            |                  |
| <u>Do</u> | Not Provide Name/Contact Inform          | nation If The I       | Person Requests Confident  | <u>tiality</u>   |
| Nar       | ne:                                      |                       |                            |                  |
| Pho       | ne:                                      |                       |                            |                  |
| Rela      | ationship:                               | <del></del>           |                            |                  |
| Wh        | ich best describes the location of th    | ne crime? (Che        | ck all the apply)          |                  |
|           | O On-Campus                              |                       |                            |                  |
|           | O Off-Campus, public property im         | ımediately adja       | acent to campus (sidewalks | , streets, etc.) |
|           | O Off-Campus, but on Campus lea          | sed or control        | led space                  |                  |
|           | O Off-Campus, <b>NOT</b> affiliated with | n and <b>NOT</b> adja | acent to campus            |                  |
|           | O Unknown                                |                       |                            |                  |
| If lo     | cation is known, please provide spo      | ecifics (buildin      | g name, address, office nu | mber, etc)       |
|           |  |                       |                            |                  |
|           |  |                       |                            |                  |
|           |  |                       |                            |                  |
|           |  |                       |                            |                  |
| Is tl     | nere evidence that this crime was m      | notivated by b        | ias?                       |                  |
|           | O Yes                                    |                       |                            |                  |
|           | O No                                     |                       |                            |                  |

| 0       | Race   |
|---------|--|
| 0       | Religion   |
| 0       | Sexual Orientation   |
| 0       | Gender   |
| 0       | Gender Identity  |
| 0       | Disability   |
| 0       | Ethnicity  |
| 0       | National Origin  |
|         |  |
| Please  | provide a summary supporting bias motivation for Hate Crime. |
|         |  |
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| Additio | onal Information:  |
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If you answered "Yes", please identify each category that contributed to the bias.