



OFFICE OF STUDENT LIFE

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 crime information that will be included in the campus' Annual Security Report.

It is the aim of the Howard Payne University to ensure that victims of and witnesses to crime are aware of their right to report criminal acts to the police, and to report University policy violations to the appropriate office (e.g., student conduct violations to the Office of Student Life). 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.

The Office of Student Life 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:

Magen Bunyard, Ed.D.
Vice President for Student Life and Dean of Students
1000 Fisk Street
Brownwood, TX 76801
(325) 649-8613

Person Receiving Report: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Report Made by:

\_\_\_\_\_ Victim
\_\_\_\_\_ Third Party (please identify relationship to victim): \_\_\_\_\_

Name (if willing for it to be on this report): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Address: \_\_\_\_\_

Incident Date: \_\_\_\_\_ Incident Time: \_\_\_\_\_ (a.m. / p.m.)

Description of the incident or crime: \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

(Form continued on reverse. Use additional pages for description as necessary and attach.)

**Location of Incident**

Identify building name, address, etc. Be as specific as possible: \_\_\_\_\_

The location where this incident occurred was:

- \_\_\_\_\_ On campus, but not in student housing
- \_\_\_\_\_ On campus student housing
- \_\_\_\_\_ Off-campus affiliated property (owned, controlled, or affiliated with the campus; leased property)
- \_\_\_\_\_ Off-campus public property immediately adjacent to campus
- \_\_\_\_\_ Off-campus, NOT affiliated with or not adjacent to campus
- \_\_\_\_\_ Unknown

**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

If yes, 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: \_\_\_\_\_ No Yes, alcohol \_\_\_\_\_ Yes, drugs \_\_\_\_\_

Assailant: \_\_\_\_\_ No Yes, alcohol \_\_\_\_\_ Yes, drugs \_\_\_\_\_

Were any of the following crimes involved (Y or N)? Dating Violence \_\_\_\_ Domestic Violence \_\_\_\_  
Stalking \_\_\_\_

**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, any other crime involving bodily injury, larceny-theft, simple assault, intimidation, and destruction/damage/vandalism of property.*

Was this incident motivated by hate or bias? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, identify the perceived category of prejudice:

- \_\_\_\_\_ Race \_\_\_\_\_ Gender \_\_\_\_\_ 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 (describe): \_\_\_\_\_

Number of individuals arrested or referred for campus disciplinary action: \_\_\_\_\_