

# Clery Incident Report Form

*For Campus Security Authorities Walters State Community College*

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## Purpose Of Clery Reporting

The purpose of the Clery Act is to encourage reporting and the accurate collection of campus crime statistics to promote crime awareness and to enhance campus safety through reliable statistical records. The purpose of this report form is to provide a uniform procedure for documenting the what, when, and where of certain reportable crimes and/or non-criminal hate motivated incidents that has occurred within one of the four reporting locations and which have been reported to a Campus Security Authority (CSA) other than the Walters State Police Department. Data collection on this form is to be used to increase public safety, not to identify the victim; therefore, no personal identifying information shall be included on this form. All cooperating victims who do not wish to remain anonymous should be directed to the Walters State Police Department or the law enforcement agency having jurisdiction where the crime occurred. It is the policy of Walters State Community College to encourage victims and/or witnesses to crime(s) to report such crimes to the police and/or to a designated Campus Security Authority. (A complete list of Campus Security Authorities (CSA's) can be found in the Annual Safety Report, which is available at <http://www.ws.edu/student-services/campus-safety/crime-reports>. For the purposes of CLERY, CSA's are required to document certain reportable crimes and non-criminal hate motivated incidents which have been reported to them and which have occurred in the below outlined locations.

**CLERY documentation is not satisfied by simply directing/ referring the reporting party to the police department. In order for the college to satisfy the statistical reporting requirements of the Clery Act, all CSA's are required to complete this form when any of the specified offenses listed below are reported to them. A person reporting a crime shall also be encouraged to report the crime to the Campus Police Department.**

## Location Of Crime (Choose One)

**On-Campus:** Any building or property owned or controlled by an Institution within the same reasonably contiguous geographic area and used by the Institution in direct support of, or in a manner related to, the Institution's educational purposes, including residence halls; and any building or property that is within or reasonably contiguous geographic area that is owned by the Institution but controlled by another person, is frequently used by students, and supports Institutional purposes (such as food or other retail vendor).

**On-Campus Residential:** Any student housing facility that is owned or controlled by the Institution, or is located on property that is owned or controlled by the Institution, and is within the reasonably contiguous geographic area that makes up the campus is considered an on-campus student housing facility.

**Non-Campus Property:** Any building or property owned or controlled by a student organization that is officially recognized by the Institution; or any building or property owned or controlled by an Institution that is used in direct support of, or in relation to, the Institution's educational purposes, is frequently used by students, and is not within the same reasonably contiguous geographic area of the Institution.

**Public Property:** All public property, including thoroughfares, streets, sidewalks, and parking facilities, that is within the campus, or immediately adjacent to and accessible from the campus.

## Hate Crime

Any crime manifesting evidence that the victim was selected because of the victim's actual or perceived race, religion, sexual orientation, gender, ethnicity/national origin, or disability. Generally pertains to but is not limited to the following crimes: Intimidation, Larceny, Simple Assault and Vandalism.

## Bias Motivation

A performed negative opinion or attitude toward a group of persons based on their race, gender, religion, disability, sexual orientation or ethnicity/national origin.

## Sex Offenses

Sex offenses are of special concern to the campus community because they have been historically under reported. The victim of a sex offense typically desires confidentiality and anonymity; as a result, he/she will often seek a reporting source other than law enforcement such as a designated Campus Security Authority (CSA). Because the sex offender may continue to pose a threat to the community, the threat potential needs to be evaluated and the campus community alerted/warned as necessary. In this regard, additional information is requested for this type of crime.

**Sexual Offense: Any sexual act directed against another person, forcibly and/or against that person's will; or not forcibly or against the person's will where the victim is incapable of giving consent.**

# Clery Crime Report Information

Reporting CSA W# \_\_\_\_\_ CSA Name \_\_\_\_\_  
 CSA Campus Location \_\_\_\_\_ CSA Department: \_\_\_\_\_  
 Date of Incident \_\_\_\_\_ Time of Incident \_\_\_\_\_ Date of Report \_\_\_\_\_

### Reporting Party

- Victim    Witness    Suspect  
 Other Explain: \_\_\_\_\_

### Location Crime Occurred

- On-Campus Property  
 On-Campus Residential  
 Non-Campus Property  
 Public Property

### Was A Police Report Filed?

- Yes  
 No  
 Unknown  
 Specify department where filed: \_\_\_\_\_

### Address where crime occurred (if known) or description of general location:

\_\_\_\_\_

### Clery Crimes (Choose all that apply)

- |                                       |   |  |   |
|---------------------------------------|---|--|---|
| <input type="checkbox"/> Homicide     | <input type="checkbox"/> Aggravated Assault         | <input type="checkbox"/> Burglary            | <input type="checkbox"/> Alcohol Violations       |
| <input type="checkbox"/> Manslaughter | <input type="checkbox"/> Sex Offense — Forcible     | <input type="checkbox"/> Motor Vehicle Theft | <input type="checkbox"/> Drug/Narcotic Violations |
| <input type="checkbox"/> Robbery      | <input type="checkbox"/> Sex Offense — Non-Forcible | <input type="checkbox"/> Arson               | <input type="checkbox"/> Weapons Violations       |

### Hate Crime

#### Hate Crime Involved

- |  |                                    |
|--|------------------------------------|
| <input type="checkbox"/> Bodily Injury | <input type="checkbox"/> Email     |
| <input type="checkbox"/> Vandalism     | <input type="checkbox"/> Telephone |
| <input type="checkbox"/> Message       | <input type="checkbox"/> Other     |

### Bias Motivation Category

- |                                    |  |   |
|------------------------------------|--|---|
| <input type="checkbox"/> Ethnicity | <input type="checkbox"/> Gender          | <input type="checkbox"/> Sexual Orientation |
| <input type="checkbox"/> Race      | <input type="checkbox"/> Disability      |   |
| <input type="checkbox"/> Religion  | <input type="checkbox"/> National Origin |   |

### Offender

- |  |   |
|--|---|
| <input type="checkbox"/> <b>Known Offender</b> | <input type="checkbox"/> <b>College Affiliated</b>      |
| <input type="checkbox"/> Friend                | <input type="checkbox"/> Student                        |
| <input type="checkbox"/> Boy / Girlfriend      | <input type="checkbox"/> Staff                          |
| <input type="checkbox"/> Classmate             | <input type="checkbox"/> Faculty                        |
| <input type="checkbox"/> Acquaintance          | <input type="checkbox"/> Unknown Offender<br>(Stranger) |
| <input type="checkbox"/> Date                  |   |
| <input type="checkbox"/> Other                 |   |

### Incident Involved

- |   |                                       |   |   |
|---|---------------------------------------|---|---|
| <input type="checkbox"/> <b>Alcohol</b> | <input type="checkbox"/> <b>Drugs</b> | <input type="checkbox"/> <b>Narcotics</b> | <input type="checkbox"/> <b>Weapon Involved</b> |
| <input type="checkbox"/> Victim         | <input type="checkbox"/> Victim       | <input type="checkbox"/> Victim           | <input type="checkbox"/> Yes                    |
| <input type="checkbox"/> Offender       | <input type="checkbox"/> Offender     | <input type="checkbox"/> Offender         | <input type="checkbox"/> No                     |
| <input type="checkbox"/> Both           | <input type="checkbox"/> Both         | <input type="checkbox"/> Both             |   |

### Injuries

- Victim was not injured  
*(Excluding emotional/psychological trauma)*  
 Victim was injured

### Describe Weapon Involved

### Brief description of crime or incident and any injuries sustained:

\_\_\_\_\_