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**
**Do Not Provide name/contact information if the person requests confidentiality**

Date Incident Reported CSA: __________________   (MM/DD/YYYY)

CSA Contact Information *(Contact Information is Mandatory)*

First and Last Name: __________________________________

Campus Phone: ______-______-_______

E-mail:_____________________________________

Date(s) of Incident Occurrence *(SELECT ONE CATEGORY)*

- Specific Date: _____/_____ /______        (MM/DD/YYYY)
- Date Range:  From: _____/_____ /______ To: _____/_____ /_______    (MM/DD/YYYY)
- Date(s) Unknown:

**Incident Description: Please provide specific information relative to the reported incident.**

(If additional space is required, please document on the last page)

________________________________________________________________________

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

○ **Homicide** – Murder, Non-negligent Manslaughter, and Negligent Manslaughter

○ **Assault-Aggravated** – The unlawful attack upon another with intent to inflict great bodily harm.

○ **Sexual Assault**- Rape, Fondling, Incest or Statutory Rape
  
  Were the victim and offender acquainted? **(Check appropriate box)**
  
  ○ Yes
  ○ No
  ○ Unknown

○ **Burglary** – The unlawful entry into a structure to commit a felony or theft.

○ **Robbery** – The taking/attempting to take something by force, violence, threat, or by putting victim in fear.

○ **Motor vehicle theft** – The theft of automobiles, trucks, etc., including "joyriding" by a person(s) without lawful authority.

○ **Arson** – 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.

○ **Liquor Law Violations**- The underage possession, consumption or distribution to minors. **(Check appropriate action)**
  
  ○ Arrest
  ○ Student Referral

○ **Drug Law Violation**- The use, possession or distribution of controlled substances; or possession of drug paraphernalia. **(Check appropriate action)**
  
  ○ Arrest
  ○ Student Referral

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○ **Weapon Law Violation**: The possession or use of any or all illegal weapons. (Check appropriate action)
  
  ○ Arrest  
  ○ Student Referral  

○ **Hate crime**: 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  
  - Burglary  
  - Motor Vehicle Theft  
  - Arson  

○ **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  

○ **Violence Against Women Act (VAWA) Offenses**: VAWA includes:
  
  - Dating Violence  
  - Domestic Violence  
  - Sexual Assault  
  - Stalking  

○ **Other crimes**: (Specify)  

To your knowledge, was law enforcement notified?

○ Yes  
○ No
Was the crime reported to you by the victim or third party?

○ Victim
○ Third Party

If Third Party, please provide:

Do Not Provide Name/Contact Information If The Person Requests Confidentiality

Name: _______________________________
Phone: _______________________________
Relationship: _________________________

Which best describes the location of the crime? (Check all that apply)

○ On-Campus
○ Off-Campus, public property immediately adjacent to campus (sidewalks, streets, etc.)
○ Off-Campus, but on Campus leased or controlled space
○ Off-Campus, **NOT** affiliated with and **NOT** adjacent to campus
○ Unknown

If location is known, please provide specifics (building name, address, office number, etc...)

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Is there evidence that this crime was motivated by bias?

○ Yes
○ No
If you answered “Yes”, please identify each category that contributed to the bias.

- Race
- Religion
- Sexual Orientation
- Gender
- Gender Identity
- Disability
- Ethnicity
- National Origin

Please provide a summary supporting bias motivation for Hate Crime.

Additional Information: