



CSA/Dept. _____

“Campus Security Authority” Easy Check Off List for Crime Report Preparation

According to the Higher Education Act, or 20 U .S.C. 1092 now known as the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, Hawaii Community College **must** collect certain campus crime statistics.

Use this sheet to record details/facts of an incident being reported to you when the victim **does not** wish to report the incident to Campus Security. Your name will not be released, but it will help ensure the crime is not counted twice. The object of this form and your responsibility are to ensure HawCC is recording the actual number of crimes that occur on or near HawCC throughout the year. **Please advise the victim of a crime that their name will not be reported, but Federal law requires the crime itself be reported.**

Date of crime: _____ Time of occurrence: _____

Location of crime: Please give building name, parking lot number, street name with cross streets or close address, or nearby buildings, etc. Use a HawCC campus map and circle location if necessary.

- Crime reported:
- | | | | |
|---|---|---|----------------------------------|
| <input type="checkbox"/> Burglary | <input type="checkbox"/> Murder | <input type="checkbox"/> Manslaughter | <input type="checkbox"/> Robbery |
| <input type="checkbox"/> Forcible sex offense | <input type="checkbox"/> Motor vehicle theft | <input type="checkbox"/> Aggravated assault | |
| <input type="checkbox"/> Liquor Violation | <input type="checkbox"/> Non-forcible sex offense | <input type="checkbox"/> Arson | |
| | <input type="checkbox"/> Drug Violation | <input type="checkbox"/> Weapon Violation | |
- Simple Assault (only applies to hate crime reporting)

Disciplinary referral reported:
 Liquor Violation Drug Violation Weapon Violation

Head Count for Liquor/Drug/Weapon Violations: _____

Hate Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No
Based On:
<input type="checkbox"/> Race <input type="checkbox"/> Gender <input type="checkbox"/> Religion <input type="checkbox"/> Sexual Orientation <input type="checkbox"/> Ethnicity <input type="checkbox"/> Disability

Location Classification:
 On-Campus Public Property Non-Campus

Law Enforcement Agency(s) the incident has been reported to:
 None HI County Police Department HI State Sheriff Department Other _____

Police Report Number: _____

Please give a description of the crime/incident to help Campus Security classify it:

Date: _____ Phone #: _____ E-mail: _____

Please submit this form to HawCC Campus Security and keep a copy for your records. If you have questions about classifying a crime or a location, contact Robert Pickens or Abe Kapua, Campus Security Officers, at 934-2760, or via e-mail at <mailto:hawccsec@hawaii.edu>.

Date Submitted to Campus Security: _____