

Prairie State College **Campus Security Authority (CSA) Reporting Form**

This form is to be used by individuals identified as a “Campus Security Authority” who are required under the federal Clery Act to report information they receive about crimes. The information collected from these forms will be used to compile statistics to be included in the campus’ Annual Security Report. For incidents requiring an immediate response, contact PSCPD (708)709-7777. Otherwise, please forward this completed form to: PSCPD in Room 1100 of the Main Campus building **as soon as possible but no later than the next business day after the incident was reported to you.**

Date of report: _____ Date the incident occurred (mm/dd/yyyy): _____

Name of campus security authority: _____

Department and contact number _____

If multiple incidents were reported or if the date the incident occurred is unknown, please note below:

Reporting Person Contact Information

Reported By: The Victim <input type="checkbox"/> A Third Party <input type="checkbox"/>	
First Name:	Last Name:
Phone Number:	E-mail Address:
If a third party (e.g. <i>relative, friend or parent</i>) reported the crime to you, please enter the relationship of the third party to the victim: _____	

Agency Notified

If, to your knowledge, a law enforcement agency was notified, please enter the name of that agency.

Agency: _____

Does the victim want the incident reported to law enforcement? Yes No

Incident Information

Location of incident: <i>building name, street address, office number:</i> (see location details, below) _____
Time of incident (<i>if known</i>): _____
Incident description (<i>Please provide specific, detailed information; can attach additional document if necessary.</i>)

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Incident category:		<i>(Incident Definitions are available in the PSC Annual Security Report)</i>	
Homicide	<input type="checkbox"/>	Burglary	<input type="checkbox"/>
Sex Offense	<input type="checkbox"/>	Robbery	<input type="checkbox"/>
Aggravated Assault	<input type="checkbox"/>	Arson	<input type="checkbox"/>
Motor Vehicle Theft			<input type="checkbox"/>
Dating Violence	<input type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Stalking	<input type="checkbox"/>	Hate Crime <i>Please see below for additional information.</i>	<input type="checkbox"/>
Arrest for Liquor Law Violation	<input type="checkbox"/>	Referral for Liquor Law Violation	<input type="checkbox"/>
Arrest for Drug Law Violation	<input type="checkbox"/>	Referral for Drug Law Violation	<input type="checkbox"/>
Arrest for Weapons Law Violation	<input type="checkbox"/>	Referral for Weapons Law Violation	<input type="checkbox"/>
Other Crime Category	<i>If the crime was not listed above, please enter the additional crime category: _____</i>		

I am not sure how to classify this incident.

Clery, Federal and State crime definitions can be found in the Annual Security Report at:

<https://prairiestate.edu/student-services/health-and-safety/police-and-campus-safety/index.aspx#annual>

Is there any evidence that this crime was motivated by bias? Yes No

If yes, please choose any/all categories of bias that apply.

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

If you answered “yes” to the Motivated by Bias question, please provide a brief summary of the evidence supporting a bias motivation:

Location details

What best describes the location of the crime? *(If the crime occurred in multiple places, check all that apply. Please see the attached for further explanation as to the geography.)*

- On campus
 Public property immediately adjacent to campus
 Non-campus in a College owned leased, or controlled space
 Unknown location, other
 I do not know which category this location would fall under.