

TAFT COLLEGE INCIDENT REPORT FORM

To ensure the campus is aware of potentially dangerous situations, you are asked to report incidents that may suggest something more serious. These reports will be maintained in the office of the Vice President of Student Services to track patterns of behavior that indicate a potential risk for members of the campus community.

Immediately report by phone any aggressive physical contact to the Campus Safety Office at 661-763-7872 or the Office of the Vice President of Student Services at 661-763-7854 or 661-763-7810. Any other behaviors listed below may be severe enough to warrant police intervention.

Please photocopy both pages of this report, complete them and submit it to the Office of the Vice President of Student Services as soon as possible.

Name of Offender: _____

Location on campus of incident(s) _____

Day and time _____ Reported by: _____

Position _____ Phone# _____

(Circle all applicable encountered with this individual)

1 Physical contact

- a. Pushing
- b. Grabbing
- c. Hitting
- d. Inappropriate touching
- e. Other _____

2. Other Physical Actions

- a. Hitting an object
- b. Throwing an object
- c. Slamming fists
- d. Presence of weapons
- e. Violent gestures
- f. Other _____

3. Verbal insults and threats

- a. Intimidating or abusive comments
- b. Direct verbal threat
- c. Threat to use weapon
- d. Repeated mention of weapons
- e. Repeated reference to violence
- f. Other _____

4. Classroom disruption

- a. Verbal insults
- b. Harassment of other students
- c. Disoriented behavior
- d. Repeated refusals to follow classroom guidelines for civility

e. Other _____

Continued →

TAFT COLLEGE INCIDENT REPORT FORM CONTINUED

5. Additional Information: _____

Have you reported this incident to the Campus Safety Office or Office of the Vice President of Student Services?

If yes, when? _____

Have you reported this incident to your Vice President or supervisor?

If yes, when? _____

If you would like the Campus Safety Office to work with you further, call 661-763-7872.

Incident Report Completed by: _____

Printed name: _____ Date: _____

**Once completed, return to your supervisor, Campus Safety Office, or
the Office of the Vice President of Student Services.**