

Clery Act Crime Incident Reporting Form



This form should be completed by campus security authorities who are required to report information they receive about crimes pursuant to the Clery Act. The information collected from these forms will be used to prepare a compilation of statistical crime information that will be included in the university's Annual Security Report.

It is the policy of Bridgewater State University to ensure that victims and witnesses are aware of their right to report criminal acts to the police, and to report University policy violations to the appropriate office (e.g., student conduct violations to the Office of Community Standards). However, if a reporting person requests anonymity, this request must be honored to the extent permitted by law. If the person reporting this crime to you does not wish to be personally identified, please complete the form to the best of your ability without identifying that person. BSU Police will use this form to determine the category of crime and location under which the crime should be reported according to the requirements of the Clery Act. If the BSU Police report to the scene, your reporting requirement is met and this form does **NOT** need to be completed. If the person reporting this to you is willing to speak directly with the BSU Police, call immediately at

508-531-1212, A Bridgewater State University police officer will be dispatched immediately to assist you.

Return this completed form to the Bridgewater State University Police Department

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| <ul style="list-style-type: none"> • Campus or U.S. Mail
Bridgewater State University
Police Department
c/o Lieutenant Matthew Rushton
200 Great Hill Drive
Bridgewater, MA 02325 | <ul style="list-style-type: none"> • Fax
508-531-6180 • Emergencies
911 • Business for Clery related information
508-531-2833 | <ul style="list-style-type: none"> • Email
CleryAct@bridgew.edu
mrushton@bridgew.edu • Online
www.bsu-cleryact.com |
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Section 1 – Campus Security Authority – Please identify yourself and the person reporting this to you.

<i>(identify yourself here)</i>	<i>(identify the person reporting here)</i>	
Name: _____	Name: _____	Victim <input type="checkbox"/>
Title: _____	Title: _____	Witness <input type="checkbox"/>
Dept.: _____	Dept.: _____	Other <input type="checkbox"/>
Phone: _____	Phone: _____	Anonymous Victim Report
Email: _____	Email: _____	<input type="checkbox"/>

Section 2 – Location of incident – please be as specific as possible.

- If incident occurred inside a building or parking structure, identify the address, building name, floor, and room number.
- If incident occurred outside, describe the nearest street address or intersection, whether on the street, sidewalk, park, or inside a vehicle. Be as specific as possible, include any nearby landmarks.

Address: _____ Building name, floor, unit # _____ City / State: _____ Further description: _____ _____	<p>Occurred inside</p> <p><input type="checkbox"/> On Campus Student Housing Facility</p> <p><input type="checkbox"/> Academic building</p> <p><input type="checkbox"/> Parking structure</p> <p><input type="checkbox"/> Other building</p> <p>Occurred outside</p> <p><input type="checkbox"/> Street</p> <p><input type="checkbox"/> Sidewalk</p> <p><input type="checkbox"/> Park</p> <p><input type="checkbox"/> MBTA property</p>
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Section 3 - Description of incident - As clearly as possible, describe the incident as reported to you.

Murder and Non-Negligent Manslaughter	<input type="checkbox"/>
Negligent Manslaughter	<input type="checkbox"/>
Sex Offenses	<input type="checkbox"/>
Robbery	<input type="checkbox"/>
Aggravated Assault	<input type="checkbox"/>
Burglary	<input type="checkbox"/>
Arson	<input type="checkbox"/>
Motor Vehicle Theft	<input type="checkbox"/>
<i>Domestic Violence</i>	<input type="checkbox"/>
<i>Dating Violence</i>	<input type="checkbox"/>
<i>Stalking</i>	<input type="checkbox"/>

Alcohol, Drug, or Weapons violation in which the person was either:

- Summoned, cited, or arrested by police or
- Referred for internal BSU judicial proceedings

Hate Crime – any crime where the victim was intentionally selected because of the victim’s:

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

Bias motivated committing one of the following:

Larceny-Theft	<input type="checkbox"/>	Simple Assault	<input type="checkbox"/>
Intimidation	<input type="checkbox"/>	Destruction/Damage/Vandalism of property	<input type="checkbox"/>

- Describe how, when and where the incident occurred.
- Describe any injuries that occurred.
- Date the incident was reported to you:

Narrative:
