DATE OF CRIME:______________________ TYPE OF CRIME:______________________

LOCATION OF INCIDENT:______________________________________________________

LOCATION CLASSIFICATION

☐ On-Campus       ☐ Non-Campus
☐ On-Campus Residential ☐ Public Property

CRIME:

☐ Murder       ☐ Manslaughter       ☐ Rape       ☐ Domestic Violence
☐ Dating Violence ☐ Stalking       ☐ Robbery       ☐ Burglary
☐ Aggravated Assault ☐ Vehicle Theft ☐ Arson       ☐ Narcotic Violation
☐ Alcohol Violation ☐ Weapons Offense ☐ Hate Crime

HATE CRIME:

☐ Yes       ☐ No

HATE CRIME BASED ON:

☐ Race       ☐ Gender       ☐ Religion
☐ Sexual Orientation ☐ Ethnicity ☐ Disability

DISCIPLINE REFERRAL OR ARREST FOR LIQUOR, DRUGS OR WEAPONS VIOLATIONS:

☐ Arrest       ☐ Drug Violation
☐ Discipline Referral ☐ Alcohol Violation
☐ Weapons Violation

Discipline Referral To:__________________________________________________________

According to the Higher Education Act of 20 U.S.C. 1092 now known as the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, Calvin College must collect certain campus crime statistics. This law applies to certain crimes reported to the Campus Safety Department and other campus officials.

The details of this report will not be made public. Only the number of crimes occurring will be released. Your name will not be released. It is not required for the report, but it will help ensure the crimes is not counted twice.
REPORTING PERSON:

☐ Victim  ☐ Perpetrator
☐ Witness  ☐ Third Party  NAME: __________________________

LAW ENFORCEMENT AGENCY THE INCIDENT HAS BEEN REPORTED TO:

☐ None  ☐ Grand Rapids Police Department  ☐ Other __________________________

REPORT PREPARED BY: __________________________

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Date of Report</th>
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SUMMARY OF INCIDENT

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