

**School of the Art Institute of Chicago
Campus Security Authority Crime Report Form**

Your Name: _____ Date: _____

Crime Reported to you by: _____ Your Phone Number/Email: _____

Date and Time Incident Occurred: _____

Location of Incident (building name or address): _____

Brief Description of the Incident: _____

Was incident also reported to Campus Security? Yes__ No__ Don't know ____

Was incident also reported to Chicago Police? Yes__ No__ Don't know ____

Classification: To the best of your ability, please check the type of crime reported*:

- Murder
- Manslaughter
- Sex offenses – forcible (sexual act directed against another involving force or lack of consent)
- Sex offenses – non-forcible (incest or statutory rape)
- Robbery
- Assault
- Burglary
- Motor vehicle theft
- Arson
- Hate Crime. Hate crimes include any of the above crimes, plus theft, vandalism, intimidation or simple assault, if the crime was motivated by a bias based on the victim's race, gender, gender identity, religion, disability, sexual orientation, ethnicity, or national origin.
- Domestic Violence
- Dating Violence
- Stalking

If you checked "Hate Crime" above, briefly describe why you believe the crime was motivated by bias: _____

Check the type of bias involved:

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

Alcohol, Drug or Weapon Law Violations resulting in arrest or referral for disciplinary action

(Check all that apply) Alcohol: _____ Drug: _____ Weapon (describe): _____

If known, note number of individuals Arrested _____ or Referred for campus disciplinary action _____

Please forward this completed form to:

Dave Martino, Campus Security Department, School of the Art Institute of Chicago, 37 S. Wabash Ave, Room 710A, Chicago, IL 60603, or you may email the form to dmartino@saic.edu, or fax it to 312-629-1661.

**See attached page for detailed definitions. Security will confirm the classifications, so do not be concerned whether the incident you are reporting precisely meets every requirement of the attached definitions.*