

Exploring Differences, Deepening Faith

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## **CAMPUS CRIME REPORT FORM**

NAME:
ADDRESS
PHONE NUMBER:
CRIME COMMITTED:
DATE/TIME OF CRIME:
WERE POLICE NOTIFIED? YES NO
POLICE CASE NUMBER:
CASE DETAILS: (i.e., missing/stolen items, injuries, direction of fleeing suspect)
SUSPECT I.D.: (List any distinguishing features, clothing, height, weight, etc.)

Please return this form to the Director of Administration & Facilities

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