

HOWARD COLLEGE INCIDENT/CRIME REPORT

Date of Incident: _____

Approximate Time:

Describe the Incident and All Parties Involved:

What Action was Taken?

Name of person reporting the crime (Signature if possible)

Date

Dean of Students

Date

PLEASE COMPLETE THIS FORM AND RETURN TO THE DEAN OF STUDENTS OFFICE AS SOON AS POSSIBLE.

The following information is to be completed by the Dean of Students.

This reported crime classified as:

Violent Crime

Murder _____ Burglary _____
Rape _____ Motor Vehicle _____
Robbery _____ Theft _____
Aggravated Assault _____

Nonviolent Crime

Liquor Laws
Drug Abuse
Weapons Possession
Please note if the individual was
Arrested