Loyola Marymount University
Campus Security Authority Crime & Incident Report Form

Please use this form if you are an individual identified as a “Campus Security Authority” to report the required information about specified crimes (listed below) pursuant to the federal Clery Act. The information collected from these forms is used to prepare a compilation of statistical crime information for inclusion in the campus’ Annual Security Report.

Please forward completed forms to Patricia Coffelt, LMU Department of Public Safety, Foley Annex.

CSA CONTACT INFORMATION

Last Name, First Name: __________________________________________________________________________
Department: __________________________________________________________________________________
Email: ___________________________________________ Phone # _______________________________________

Did you receive knowledge of this incident through another department? Is so, which one?
_____________________________________________________________________________________________

INCIDENT INFORMATION

To the best of your knowledge, what crime are you reporting?
**Please refer to the Crime Definitions document for assistance**

☐ Homicide ☐ Aggravated Assault
☐ Robbery ☐ Arson
☐ Rape ☐ Motor Vehicle Theft (stolen vehicle)
☐ Other Sex Offense ☐ Burglary
☐ Unknown/Other ☐ Hate Crime
(Please complete Hate Crime Information on Page 3)

For the following crimes, please indicate how many persons arrested/referred for each category.
Please indicate if the person was arrested/referred for multiple crimes.

Alcohol Arrest/Referred for Disciplinary Action How many? ______________________________________
Drug Arrest/Referred for Disciplinary Action How many? ______________________________________
Weapon Arrest/Referred for Disciplinary Action How many? ______________________________________
Date & Time of Incident:

Incident Detail:

Describe the incident in detail. This will be used to aide in determining the proper Clery Classification and to aide in identifying duplicate reporting.

Police Report Filed? □ Yes □ No □ Unknown

Which Agency?

LOCATION INFORMATION

Check appropriate location

☐ On Campus student housing

☐ On Campus, but not student housing
   All campus buildings, fields, parking structures

☐ Public Property
   Property immediately adjacent to campus

☐ Off Campus ☐ Unknown

Location of Incident ________________________________________________________________
Specific building, address if known

Location Type ________________________________________________________________
Resident hall room, office, street, other
**HATE CRIME INFORMATION**

_Hate Crime information must be reported for each of the following crimes: criminal homicide, sex offenses, robbery, aggravated assault, simple assault, burglary, larceny theft, motor vehicle theft, vandalism, intimidation, arson, and any other crime involving bodily injury._

Check type of prejudice:

- Race
- Sexual Orientation
- Gender
- Ethnicity/National Origin
- Religion
- Disability

Is there _evidence_ that the victim was specifically targeted because of prejudice?  ☐ Yes  ☐ No

Describe specific hate action or speech:

________________________________________________________________________

________________________________________________________________________

It is the policy of Loyola Marymount University (LMU) to ensure that the victims and witnesses to crime are aware of their right to report criminal acts to LMU Department of Public Safety (DPS) and to report University policy violations to the appropriate office (e.g. student conduct violations to the Dean of Students). However, if a reporting person requests anonymity, this request must be honored to the extent permitted by law. Accordingly, no information should be included on this form that would personally identify the victim without his/her consent.

Based on information received, LMU DPS will determine the category of the crime or incident and the location under which the incident should be reported in the Annual Security Report.

The legislation requires that each department’s records related to the Clery reportable crime statistics be retained for seven years.

For questions regarding this form, please contact Patricia Coffelt at pcoffelt@lmu.edu or 310.568.6118 to discuss approaches for more efficient provision of the information.

**FOR LMU DPS ONLY**

Was this incident previously counted?  By whom?

________________________________________________________________________

Incident Report #:________________________________________________________  Agency:________________________________________________________

Clery Crime:__________________________________________________________  Clery Location:____________________________________________________

Number of Incidents Counted:________________________________________

Notes: