



**CSA CRIME REPORT**  
SD23 (09/24/19)

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Please forward completed forms to:

Director of Campus Security, Botetourt Hall, [dcarlson@hollins.edu](mailto:dcarlson@hollins.edu) / Fax: (540) 362-6624

As a “Campus Security Authority,” you must report Clery reportable crimes by completing this form and forwarding it to the Director of Campus Security for Hollins University. This report applies to both employees and students who have ‘reported’ a crime to you.

**CRIME REPORTED BY:**

**Name of Reporting Person:** \_\_\_\_\_

(If this is a confidential crime report, write ANONYMOUS above)

Victim       Witness       Other Third Party       Offender

**Date & Time of Incident:** \_\_\_\_\_

**Security Report Filed?**     Yes     No     Unknown

**Police Report Filed?**     Yes     No     Unknown

**Which Agency?** \_\_\_\_\_

**CRIMINAL OFFENSES:**

**Check type of Crime:**

*\*\*Please refer to the CSA Definitions Informational for assistance\*\**

- |  |   |
|--|---|
| <input type="checkbox"/> Murder/Non-Negligent Manslaughter | <input type="checkbox"/> Negligent Manslaughter |
| <input type="checkbox"/> Rape                              | <input type="checkbox"/> Fondling               |
| <input type="checkbox"/> Incest                            | <input type="checkbox"/> Statutory Rape         |
| <input type="checkbox"/> Robbery                           | <input type="checkbox"/> Aggravated Assault     |
| <input type="checkbox"/> Burglary                          | <input type="checkbox"/> Motor Vehicle Theft    |
| <input type="checkbox"/> Arson                             |   |

**VAWA OFFENSES:**

**Check type of Crime:**

*\*\*Please refer to the CSA Definitions Informational for assistance\*\**

- |  |  |                                   |
|--|--|-----------------------------------|
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Dating Violence | <input type="checkbox"/> Stalking |
|--|--|-----------------------------------|



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### Offense Details:

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

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Is there *evidence* that the victim was specifically targeted because of prejudice?

Yes (complete Hate Crimes section)

No (skip Hate Crimes section)

### HATE CRIMES:

*Hate Crimes include the above-mentioned crimes with the addition of the five below:*

**Check other type of Hate Crime:**

***\*\*Please refer to the Crime Definitions document for assistance\*\****

Larceny-Theft     Vandalism     Intimidation     Simple Assault

Any Other Crime Involving Bodily Injury

**Check type of Prejudice:**

Race                       Sexual Orientation                       National Origin

Gender                       Ethnicity                       Gender Identity

Religion                       Disability

Describe specific hate action or speech:

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**ARRESTS AND REFERRALS**

For the following crimes, please indicate how many persons were arrested or referred for each category.

- Weapons Law Violation Arrest      How many? \_\_\_\_\_
- Weapons Law Violation Referral      How many? \_\_\_\_\_
- Drug Abuse Violation Arrest      How many? \_\_\_\_\_
- Drug Abuse Violation Referral      How many? \_\_\_\_\_
- Liquor Law Violation Arrest      How many? \_\_\_\_\_
- Liquor Law Violation Referral      How many? \_\_\_\_\_

**LOCATION INFORMATION**

**Check appropriate location**

- On Campus/Campus-student housing
- On Campus, but not student housing (All Campus Buildings, Fields, Parking Areas)
- Non-Campus Property (controlled by student organizations or owned/controlled by HU and frequently used by students; includes housing/classrooms leased by HU for students)
- Public Property (Public Property immediately adjacent to campus; includes sidewalks)
- Off Campus (none of the above)       Unknown

**Location of Incident** \_\_\_\_\_  
Specific Building, address, or name of street(s)

**Location Type** \_\_\_\_\_  
Residence hall room, office, street, driveway, apartment, hallway, etc.

**“CAMPUS SECURITY AUTHORITY” CONTACT INFORMATION**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone #: \_\_\_\_\_ Date Submitted: \_\_\_\_\_



## CSA CRIME REPORT

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It is the policy of Hollins University to ensure that the victims and witnesses to crime are aware of their right to report criminal acts to the police and other university officials and to report University policy violations to the appropriate office (e.g. student conduct violations to the Office of Student Affairs).

Based on information received, Hollins University's Director of Campus Security will determine the category of the crime or incident and the location under which the incident should be reported in the Annual Security Report.

All supporting records related to Clery reportable crime statistics should be retained for seven years.

For questions regarding this form, please contact Director of Campus Security at [dcarlson@hollins.edu](mailto:dcarlson@hollins.edu) or 362-6675 to discuss approaches for more efficient provision of the information.

### FOR DEPARTMENT OF CAMPUS SECURITY USE ONLY

Was this incident previously counted? \_\_\_\_\_ By whom? \_\_\_\_\_

Security Report # \_\_\_\_\_

Clery Crime: \_\_\_\_\_

Clery Location: \_\_\_\_\_

Number of Incidents Counted: \_\_\_\_\_

Notes: