## Campus Security Authority Reporting Form

The CSA Report Form is to be used by Campus Security Authorities (CSAs) or individuals who believe they may be a Campus Security Authority, to report Clery Act Crimes. CSAs are responsible for reporting allegations of Clery Act Crimes that are reported to them in their capacity as a CSA. CSAs are not responsible for determining whether a crime took place. Whether or not you know you are a CSA please use this form.

In an emergency, call 911.

In most cases it is possible for a CSA to fulfill his or her responsibility while still maintaining victim confidentiality. You can effectively complete this form without disclosing personally identifiable information about the victim.

This CSA report **does not** automatically result in the initiation of a police or disciplinary investigation if the victim does not want to pursue that course of action. If the victim would like to pursue disciplinary action direct them to the Dean of Student Affairs, Wade Gordon at 218-733-7656 or <a href="wade.gordon@lsc.edu">wade.gordon@lsc.edu</a>.

Fill out as much information and detail as possible when using this form. If you do not know the information leave it blank. It is not your duty to investigate the incident, but rather it is your duty to report the incident. Please use extra pages as needed to properl33.94 326h.22l0 GABT G[t(he)4(m t)-3(il6080)]

## INTRODUCTION

Campus Security Authorities are federally mandated crime reporters. CSAs shall report, in a timely manner, any Clery Act crimes that they are made aware of to LSC Security by using this form. It is important for CSAs to document sufficient details of the incident to allow for proper classification of the crime(s).

\* Denotes the information is <u>required</u>.

CSA full name:	
CSA Position/Title:	
CSA phone number:	
CSA email address:	
Date incident was reported to	
CSA:	
(DD/MM/YYYY)	
*Date of incident:	
(DD/MM/YYYY)	
Time of incident:	
(00:00 AM/PM)	
*General location of	
incident:	
(building, area, etc.)	
Specific location:	

This section is <u>required</u> to fill out.

☐ Criminal Homicide: Murder and Non-	☐ Burglary
Negligent Manslaughter	
☐ Manslaughter by Negligence	☐ Motor Vehicle Theft
☐ Sexual Assault	☐ Arson
☐ Rape	☐ Dating Violence
☐ Fondling	☐ Domestic Violence
□ Incest	☐ Stalking
☐ Statutory Rape	☐ Drug/Narcotic ViolatinBT/F1 12 Tf1 0 0 1 b

Please provide a description of the reported crime (explain what happened) to help with the Clery Act crime classification.
☐ Check the box if you added information to back of this sheet or added extra sheets. You can add as many sheets of paper as necessary to properly capture the incident.
☐ Check the box if you or the reporting party has supporting documentation of the incident. This may be photos, video, texts, email or other supporting documents.