

SKSM CRIME REPORT & INTERNAL INVESTIGATION FORM

Please use this form to report information about crimes which have occurred at Starr King School for the Ministry. The information collected from these forms is used to prepare a compilation of statistical crime information for the school’s Annual Campus Crime Report.

Victims and witnesses to crimes must be made aware that they have a right to report criminal acts to police, and to report school policy violations to the appropriate office. If a person reporting 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 their consent. The legislation requires that records or actions related to crime or incident statistics be retained for seven (7) years.

Please deliver this completed form to the Dean of Students, Chris Schelin.

NAME: _____

PHONE NUMBER: _____ DATE: _____

REPORT MADE BY: Victim _____
Witness _____
Third-Party _____ (specify any relationship to the victim)

TYPE OF INCIDENT: Homicide _____ Burglary _____
Sex Offense _____ Arson _____
Robbery _____ Auto Theft _____
Assault _____ Drug/Alcohol _____

DESCRIPTION OF THE INCIDENT OR CRIME: _____

WAS A POLICE REPORT FILED? Yes _____ No _____

LOCATION OF THE INCIDENT/CRIME (Be as Specific as Possible): _____

DID THE INCIDENT OCCUR (check any that apply):

- On SKSM Campus
- On GTU/Member School Campus
- On Property Immediately Adjacent to GTU
- On Property Not Adjacent to GTU
- Unknown Location
- Other: _____

SEX OFFENSES

Examples: rape, sodomy, sexual assault with an object, fondling, incest, statutory rape.

WAS THIS CRIME A SEXUAL OFFENSE? Yes _____ No _____

WAS IT A RAPE OR ATTEMPTED RAPE? Yes _____ No _____

IF YES TO EITHER QUESTION ABOVE, WERE THE VICTIM AND ASSAILANT
AQUAINTED? Yes _____ No _____

IF YES TO THE IMMEDIATELY PRECEDING QUESTION, WERE EITHER THE
VICTIM OR THE ASSAILANT UNDER THE INFLUENCE OF ALCOHOL OR DRUGS?

Victim: Yes _____ No _____
Assailant: Yes _____ No _____

HATE
CRIMES

*Hate crime information is required to be reported for criminal homicide, sex offense,
robbery, aggravated assault, burglary, motor vehicle theft, arson, and any other crime
involving bodily injury.*

WAS THIS CRIME MOTIVATED BY HATE OR BIAS? Yes _____ No _____

IF YES, IDENTIFY THE CATEGORY OF PREJUDICE:

Race _____ Ethnicity _____ Disability _____
Religion _____ National Origin _____ Sexual Orientation _____

PROVIDE A BRIEF EXPLANATION OF THE DETERMINATION: _____

ALCOHOL, DRUG AND WEAPONS LAW VIOLATIONS

CHECK ALL THAT APPLY:

Alcohol _____ Drugs _____ Weapons _____

PROVIDE A BRIEF DESCRIPTION OF INVOLVEMENT OF ABOVE:

To Be Completed by Dean of Students:

Number of individuals arrested or referred for SKSM disciplinary action:
