Crime Incident Report Form

This form should be completed by those individuals identified as "campus security authorities" who are required to report information they receive about specified crimes (described below) pursuant to the federal *Clery Act*. The information collected from these forms will be used to prepare a compilation of statistical crime information that will be included in the campus' Annual Security Report.

It is the policy of the SWOSU to ensure that victims and witnesses to crime are aware of their right to report criminal acts to the police, and to report University policy violations to the appropriate office (e.g., student conduct violations to the Office of 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.

SWOSU Campus Police will use this form to determine the category of crime and location under which the crime should be reported according to the requirements of the *Clery Act*. Please forward this completed form to:
SWOSU Campus Police Department via campus mail or fax (580) 774-7116

Person Receiving Report: Officer Thomas
Phone Number: (848) 863-5640

Report Made by:

_____Victim

✓ Third Party Please identify relationship to victim: Mother

Date and Time the Incident occurred: 11/12/22 17:15

Description of the incident or crime: Victim was found dead laying in seat by computer.

Victim's name is ██████████ The mother who reported it is ██████████

No visible wounds; family reports no medical problems. 'Xatunes' website on computer.

Unclear what website entails, but computer was left untouched for safety. Cause of

death remains unknown.

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Location of Incident
Identify building name, address, etc.; be as specific as possible): ██████████