

## **CAMPUS COMMUNITY INCIDENT REPORT Office of Student Rights and Responsibilities**

Please complete the form and return via email to <u>deanofstudents@asu.edu</u>

Questions? You may reach Student Rights and Responsibilities at (480) 965-6547.

REPORTER INFORMATION						
NAME (LAST, FIRST, MIDDLE)		ASU ID NUMBER				
EMAIL ADDRESS			PHONE NUMBER			
AFFILIATION						
Student Parent	Faculty		Staff	Other		
CTUDENTS INVOLVED						
STUDENTS INVOLVED					DUONE NUMBER	
NAME (LAST, FIRST, MIDDLE)  ASU ID NUMBER		(			PHONE NUMBER	
DATE/TIME OF INCIDENT			LOCATION	OF INCIDI	ENT	
POLICE CALLED YES NO POLICE REPORT NUMBER  POLICE AGENCY ASUPD Tempe PD Scottsdale PD Other						
	empe PD Sco	ttsaa		Other	LINUALOVAAN	
ALCOHOL INVOLVED			YES YES	NO	UNKNOWN	
DRUGS INVOLVED SEXUAL MISCONDUCT			YES	NO NO	UNKNOWN	_
STALKING / DATING VIOLENCE / DOMESTIC VIOLENCE			YES	NO	UNKNOWN UNKNOWN	
THREATS INVOLVED			YES	NO	UNKNOWN	
WEAPONS INVOLVED			YES	NO	UNKNOWN	
INCIDENT DESCRIPTION			125		OTTAINOVIT	
THE DESCRIPTION						
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