

## CLERY ACT CRIMES REPORT – DUE ONE WEEK AFTER TRIP

Submit to the International/Intercultural Office, A003

Today's Date: \_\_\_\_\_

Trip Destination: \_\_\_\_\_

Trip Dates: \_\_\_\_\_

Trip Leader 1: \_\_\_\_\_ Email: \_\_\_\_\_

Trip Leader 2: \_\_\_\_\_ Email: \_\_\_\_\_

No crimes have been reported to either trip leader in association to this trip.

Date Incident Occurred:	
Victim's Name:	First: _____ M.I. _____ Last: _____
Victim's Student ID # (if applicable):	
Where the incident occurred (provide as many details as possible i.e., address; name of building, if applicable; cross streets, etc.):	
Describe the incident (provide as many details as possible):	

\*If more than one incident occurred, duplicate this form. A crime report must be submitted for each incident reported to you by any trip participant.

\_\_\_\_\_  
Signature of Submitter

\_\_\_\_\_  
Date