

STUDENT CRIME REPORT

If you believe you are the victim of a crime that occurred on any property owned or controlled by the University of Hartford, or any property immediately adjacent to the University, we encourage you to report the incident to a University official.

Your name is not required on this form. Anonymous complaints are welcomed and will be recorded. However, if you want the complaint to be investigated by the Department of Public Safety and/or a local police agency, you must provide your name and agree to be interviewed.

1. Complainant Name (optional): _____

2. Name(s) of Accused (optional): _____

3. Check all that apply to you in the section below:

Female

Staff Member

Male

Faculty Member

Undergraduate Student

Other (specify) _____

Graduate Student

4. Location of the incident: general location is adequate (Regents West, Gengras first floor, etc.):

5. Date and time of incident: _____

6. If you have reported this incident to another on-campus resource (faculty or staff member), please note the resource or department (names are optional):

7. Complaint: Describe the incident in detail. Use additional pages if needed.

Continue to back of this form

