

Be part of the solution  
by reporting the problem

# CRIME LINE

Alcohol ■ Bullying ■ Drugs ■ Harassment ■ Intimidation  
Theft ■ Threats ■ Vandalism ■ Violence

# Anonymous Information Report

## Type of incident \_\_\_\_\_

Alcohol

Drugs

Theft

Violence

Assault

Harassment

Threats

Weapon

Bullying

Intimidation

Vandalism

Other

## Persons involved in incident \_\_\_\_\_

Names of persons involved \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Details of incident \_\_\_\_\_

Time \_\_\_\_\_ Date \_\_\_\_\_ Where it happened \_\_\_\_\_

## Describe what you saw or what you know (Use back if necessary) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Person reporting the incident (Optional)

Name \_\_\_\_\_ Grade \_\_\_\_\_

School \_\_\_\_\_