

Appendix C

**McLENNAN COMMUNITY COLLEGE
CAMPUS POLICE DEPARTMENT**

INCIDENT REPORT

Case # _____ - _____ - _____

Date _____ Day of the Week _____ Duty Hours _____ to _____

Time Dispatched _____ Time of Arrival _____ Time Clear _____

LOCATION OR BUILDING NO. _____

SITUATION _____

ACTION TAKEN _____

NARRATIVE _____

REPORTING OFFICER _____ BADGE # _____