

Annual Report – Safety and Incident

INSTRUCTIONS: This form is to be submitted by Study Center Directors or Liaisons with their annual report.

Name of Study Center Director: _____

Date report sent to UOEAP: _____

Study Center: _____

Term and Year: _____

Totals:

Total number of incidents (accidents/crime/other): _____
Reported to host university authorities: _____
Reported to police: _____
Reported to US Consulate/Embassy: _____

Accidents:

Total Number of Accidents during Term: _____
Number of Accidents requiring students to seek medical attention: _____
Number of Accidents requiring Student to return home: _____
Involving: Bicycles No. _____
Motorbikes/motorcycles: No. _____
Pedestrian No. _____
Vehicles (Car, Bus, Taxi) No. _____
Other No. _____

Violent Crimes (as defined by FBI):

Homicide: _____
Rape: _____
Robbery: _____
Aggravated Assault: _____
Location: In student's home/living space: _____
On host university campus: _____
Near (within .5 mile/1 km) host university campus: _____
In primary city of residence while abroad: _____
While traveling: _____
Other: _____

Property Crimes:

Total number of property crimes reported: _____
(Burglary, Bicycle Theft, all other theft (including passport theft)
Motor Vehicle Theft, Arson, Simple Assaults)
Location: In student's home/living space: _____
On host university campus: _____
Near (within .5 mile/1 km) host university campus: _____
In primary city of residence while abroad: _____
While traveling: _____
Other: _____

Other crime(s) on local campus/locale (not involving UC students) which may provide helpful information for UC programs, for example a particular neighborhood that has been affected by a particular rash of crime incidents. This allows EAP staff to discuss with Study Center staff and (where applicable) improve information provided to UC students prior to departure.