

Stalking Incident Log

What is happening to you is not your fault. A detailed account of the events that are taking place is the most critical part of an investigation related to stalking. Filling out this log does not require you to press charges against your stalker, but it does allow you to have an organized record of events should you choose to do so at a later time. Please be as detailed as possible when completing this log. It is a good idea to keep a copy of this log with someone you trust, as well as to save any items, phone messages, recordings, letters, text messages, etc. that you have received from this person. If you need anything at any time, please call the Advocates Program Coordinator at 229-5122 or Security and Safety at 229-5555.

YOUR INFORMATION:

First Name	Last Name	Sex	Age/Date of Birth
Home Address/Dorm		Phone	
Work Address		Phone	

SUSPECT INFORMATION:

First Name	Last Name	Middle Name/Initial	Nickname(s)	
Sex	Race	Age/DOB	Height	Weight
Eye Color	Hair Color	Distinguishing Characteristics (tattoos, facial hair, scars, piercings, etc.)		
Vehicle Description (Make, model, license, color, state, distinguishing characteristics)				
Home Address/Dorm			Phone	
Work Address			Phone	
Access to Weapons? (if so, which?)		Use of Drugs or Alcohol? (if so, which?)		

INCIDENT:

Date	Time	Location		
Witness Name	Phone	Residence	Relationship to Survivor	
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Law Enforcement Agency (if involved)		Officer Name	Report No.	

Description of Incident:
