



RADNOR TOWNSHIP SCHOOL DISTRICT SECURITY DEPARTMENT

THEFT AND VANDALISM REPORT

BUILDING: _____

Date and Approximate Time of Vandalism / Breach of Security:

Discovered Date: _____ Time: _____ Last Observed Date: _____ Time: _____

Type of Incident: _____

Exact Location of Incident: _____

School District Property

Personal Property

Victim's Name: _____

Address: _____ Phone: _____

Description of Damage: _____

Description of Missing Property: _____

Value: \$ _____

Was the Incident Reported to Radnor Township Police? _____

If so, when? _____ By whom? _____

Did the Police Investigate at the Scene? _____

Police Complaint Number: _____

In Cases of Fire, was the Fire Department called? _____

Date

Signature of Person Submitting Report

Submit to the Director of Security within 24 hours