

**INCIDENT REPORT SHEET**

**DATE OF INCIDENT:** ..... **TIME:** .....

**DATE REPORTED TO GENESIS:**.../...../..... **INCIDENT NO:**.....

**INCIDENT REPORTED BY:** .....

**NAME OF PERSON TAKING THE REPORT:**.....

**COPY OF 'DODGY PUNTER' COMPLETED AND ATTACHED?**

**TYPE OF VIOLENCE:**

**BRIEF DESCRIPTION OF VIOLENT INCIDENT:**

- ROBBERY .....
- VIOLENT ASSAULT .....
- SEXUAL ASSAULT .....
- RAPE (see guidelines) .....
- THREATENED WITH WEAPON .....
- KIDNAPPED (i.e. taken away against her will) .....
- IMPRISONED (i.e. held by force) .....
- DRIVEN AT/PUSHED FROM CAR .....

**NUMBER OF PERSONS INVOLVED:** .....

**LOCATION OF ATTACK:** .....

**WHERE INITIALLY MET:**.....

**ROUTE TAKEN:**.....

**WAS THE PERSON.....ON FOOT.....DRIVING A CAR ORVAN.....**

**REGISTRATION NUMBER:**.....

**WITNESSES (Note: if rape, 1<sup>st</sup> person met and told about attack):**.....

**IF PHONED FOR HELP, WHERE FROM?**.....

**DID YOU TRAVEL TO THE LOCATION BY TAXI? YES/NO**

**DID YOU TAKE THE NUMBER OF THE TAXI? YES/NO**

**TAXI NO:** .....**PRIVATE/PUBLIC HIRE:** .....

WAS THIS REPORTED TO THE POLICE? **YES/NO**

WHICH DIVISION/STATION? .....

IF NOT, WHY NOT?.....

IF YES, WHAT ACTION WAS TAKEN? .....

THE ABOVE INFORMATION MAY BE PASSED TO THE POLICE, BUT YOU WILL NOT BE IDENTIFIED IF YOU SO WISH. IF THE POLICE WISH TO SPEAK TO YOU ABOUT IT, WOULD YOU BE WILLING TO BE INTERVIEWED (WITHOUT OBLIGATION TO MAKE A FORMAL COMPLAINT)? **YES/ NO**

If the incident involves a rape and police require a statement from Genesis Worker do you give your permission for us to provide this?

Signature.....Printed Name:..... Date:.....

DO STAFF FEEL THIS CAN BE LINKED TO ANY OTHER REPORTS? IF SO PLEASE NOTE NUMBERS.....

**DESCRIPTION OF ATTACKER/S**

**ATTACK REPORT NO**

**ATTACKER 1**

AGE ..... HEIGHT ..... BUILD ..... M/F  
HAIR ..... EYES ..... ACCENT ..... ETHNICITY .....

**ATTACKER 2**

AGE ..... HEIGHT ..... BUILD ..... M/F  
HAIR ..... EYES ..... ACCENT ..... ETHNICITY .....

**ATTACKER 3**

AGE ..... HEIGHT ..... BUILD ..... M/F  
HAIR ..... EYES ..... ACCENT ..... ETHNICITY .....

DISTINGUISHING MARKS, E.G. TATTOOS, SCARS, BIRTHMARKS, ETC.

WAS THIS PERSON/S KNOWN TO YOU? YES  NO   
IF YES, IN WHAT CAPACITY?.....

MOUSTACHE/BEARD?  
GLASSES?  
CLOTHING?  
JEWELLERY?

**DESCRIPTION OF CAR**

Including any objects in car such as books, tapes, babyseat, dashboard, ornaments etc.

**IF ATTACK TOOK PLACE INDOORS, DESCRIPTION OF LOCATION**

If it was someone's home, ask women to describe furnishings pictures, photographs etc.

**ANY OTHER INFORMATION WHICH MAY BE USEFUL IN IDENTIFYING THE ATTACKER?**

**Attack report sheet sent to:**

**Division/Station:**.....  
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**FAO:**

**Date Sent:**

**Receipt confirmed by:**

**Date:**

**Other information:**

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*Advice rape: if attack has just taken place do not offer a drink, encourage medical examination by police surgeon, save clothing involved and remember the crime scene?*

**Printed name of worker who completed form :** .....

**Signature of worker who completed form:** .....

**Date form was completed :** .....

Example