

RACIST INCIDENT MONITORING FORM

A racist incident is 'any incident which is perceived to be racist by the victim or any other person'

Name of person completing this form

NAME OF AGENCY:

INCIDENT REF: _____

PART 1 – THE INCIDENT

Please supply brief details of the incident

Location/Place of Incident

	Please tick	State address if known
Victim's home		
School / College		
Work		
Near victim's home		
Public transport		
Pub / club		
Shops		
Place of worship		
Other Place		

Type of Incident

Tick all that apply		
Arson		Robbery
Damage to property		Sexual Assault
Graffiti		Theft
Offensive mail		Threats
Physical assault		Verbal abuse
Discrimination in the workplace		Discrimination in services
Other (specify)		

Town/Village/Neighbourhood where the incident took place

Were there any witnesses to the incident? YES/NO

If yes do you know how to contact them? YES/NO Details

If the incident was in the victim's home please tick whether they:

Own their own home

Rent from a private landlord

Rent from the local authority/housing trust

Time of incident	AM/PM	Date of Incident	DD/MM/YYYY
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PART 2 – VICTIM DETAILS

Does the victim speak English? **YES/NO**

If no please state language spoken

Full Name			
Age		Sex M/F	
Religion	(specify)		
Address			
Postcode		LA Area:	
Contact No			

Ethnic origin of victim

White	British	
	Irish	
	Other	
Black	African	
	Caribbean	
	Other	
Asian	Bangladeshi	
	Indian	
	Pakistani	
	Other	
Mixed	White and Black	
	African	
	White and Black	
	Caribbean	
	White and Asian	
	Other Mixed	
Chinese		
Gypsy		
Traveller		
Other (please specify)		
Not stated		

Has the victim suffered previous racist incidents?

If yes, over what time have incidents occurred
(please indicate by number of incidents)

0-6 mths		7-12 mths	
1 – 5 years		6+ years	

PART 3 – PERPETRATOR DETAILS

Does the victim know the perpetrator? **YES/NO** Please state name

Ethnic origin of perpetrator(s) (see list above)

Has this perpetrator been involved in previous incidents involving the victim? **YES/NO**

How many perpetrators were involved in this incident?

How old were they?

1		2-5	
6-10		10+	

Under 10		26-40	
11-18		41-64	
19-25		65+	

TO BE COMPLETED BY THE PERSON RESPONSIBLE FOR PROGRESSING THIS INCIDENT

Was the incident reported by the victim? **YES/NO**

If no, please give details of the person reporting the incident.....

Has the incident been reported to the Police or any other agencies (specify)

What action has been taken by your agency?

Outcome – has incident been referred onto any other agency?

Has the victim been informed of the outcome? **YES/NO**