

City of Grand Junction Violence Threat Report Form

1. Name of person making threat: _____
- 1.a. If threat was made by a City of Grand Junction employee:
Department: _____ Division: _____
- 1.b. If threat was made by a person other than a City of Grand Junction employee:
Approximate age : _____ Gender : _____ Ethnicity : _____
Height: _____ Weight: _____ Color of hair: _____ Color of eyes: _____
Other characteristics: _____
Name/Address (if known): _____
Telephone number & area code (if known): _____
Car license plate number (if known) : _____
Name of employer: _____
2. Date threat was made: _____ Time of day: _____ a.m. _____ p.m. _____
3. Who was the threat made against? _____

4. Where was the threat made? _____
5. Describe the nature of the threat, what was said, in what context, and circumstances surrounding the threat. Attach other documentation or use back of this form if necessary.

6. What was the emotional state of the person making the threat at the time it was made?

7. Did the person making the threat have any weapons in their possession? Yes _____ No _____
If yes, please describe: _____
8. Do you feel there is a serious or imminent danger to people or property as a result of this threat?
Yes _____ No _____ Don't Know _____
9. Was the Police Department notified of the threat? Yes _____ No _____
10. Other Comments: _____

11. Name of person completing this form: _____ Date: _____

Please deliver this form to a member of the City of Grand Junction Threat and Violence Assessment Team (TVAT) immediately or call Human Resources at 244-1512.