

**Cypress College  
Department of Campus Safety  
Public Safety Log**

DATE / TIME REPORTED	DATE / TIME OCCURRED	INCIDENT	CODE
04-21-26 / 12:55 pm	04-21-26 / 12:30 pm	Disturbance / Student Conduct Violation	415 PC 5500 BP 1.1
<b>INCIDENT LOCATION</b>			
NOCE Building			
<b>INCIDENT SUMMARY:</b>			
Campus Safety Officers responded to the NOCE Building in regards to a disruptive individual.			
<b>DISPOSITION:</b> <input type="checkbox"/> Open <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Closed <input checked="" type="checkbox"/> Student Disciplinary Referral <input type="checkbox"/> Unfounded <input checked="" type="checkbox"/> Advised / Assisted <input type="checkbox"/> No Crime <input type="checkbox"/> Other <input type="checkbox"/> Citation <input type="checkbox"/> Arrest <input type="checkbox"/> F.I. Card <input type="checkbox"/> (e)Notification / Timely Warning Issued <input type="checkbox"/> Building Secured <input checked="" type="checkbox"/> Extra Patrol <input type="checkbox"/> Medical <input type="checkbox"/> Transported			
Campus Safety Report NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> Report # 26-085		Police Report NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> Report #	Police Event #

DATE / TIME REPORTED	DATE / TIME OCCURRED	INCIDENT	CODE
04-21-26 / 6:09pm	04-21-26 / 2:00pm - 5:00pm	Failure to Leave Information After an Accident	20002 CVC
<b>INCIDENT LOCATION</b>			
Parking Lot 5			
<b>INCIDENT SUMMARY:</b>			
Campus Safety Officers documented an incident in which a vehicle was damaged by another vehicle. The driver of the striking vehicle failed to leave any information.			
<b>DISPOSITION:</b> <input type="checkbox"/> Open <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Closed <input type="checkbox"/> Student Disciplinary Referral <input type="checkbox"/> Unfounded <input checked="" type="checkbox"/> Advised / Assisted <input type="checkbox"/> No Crime <input type="checkbox"/> Other <input type="checkbox"/> Citation <input type="checkbox"/> Arrest <input type="checkbox"/> F.I. Card <input type="checkbox"/> (e)Notification / Timely Warning Issued <input type="checkbox"/> Building Secured <input checked="" type="checkbox"/> Extra Patrol <input type="checkbox"/> Medical <input type="checkbox"/> Transported			
Campus Safety Report NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> Report # 26-086		Police Report NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> Report #	Police Event #