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STALKING INCIDENT AND BEHAVIOR LOG

Stalking is a crime that affects 7.5 million people in the United States each year. The Department of Justice defines "stalking" as: [when someone engages] in a course of conduct directed at a specific person that would cause a reasonable person to fear for [their] safety or the safety of others or suffer substantial emotional distress. It can be important to document harmful behaviors and keep a log of stalking-related incidents, especially if considering utilizing the criminal/civil justice systems. Keeping a log, like this one, can help establish patterns of behavior, often allowing for more effective safety planning.

For more information, you can visit: www.stalkingawareness.org

Name of Victim/Survivor:	Pronouns:	

Other names used (alia	ses, nicknam	es):		
Date of Birth:	te of Birth: Age: Sex (assigned at birth):			
Gender, if known:		Gender expression:		
Home Address, last kno	wn:			
Driver's license #:		State:		
Iome Phone: Cell Phone:				
Race/ethnicity:	Race/ethnicity: Language(s) spoken:			
Known Gang Affiliation:				
Do they have weapons?	?: (Y/N)	Licensed to carry a firearm?: (Y/N)		
Have they been arreste	d in the past?	P: (Y/N) If yes, what were they arrested for?		
Physical Description: Height: Weight:	Hair	Color: Eye Color:		
		fying Features (Scars, tattoos):		

Employer of Person Who Harms/Stalker/Abuser: (Occupation, company name, address, phone #, supervisor)

Optional Reflection

When did this stalking behavior begin?

Have you asked this person to stop their behavior(s) toward you? If so, please describe (date, time, what you said, how they reacted):

What else feels important to document about your experience?

Please note: This information could potentially be introduced as evidence or inadvertently shared with the person causing you harm at a future time, **you may want to consider not including any information in the log that you do not want that person to see.**

STALKING INCIDENT LOG

Date	Time	Witness Name(s) (Attach Address and Phone #)	Police Call (Report #, Officer Name, Badge #)
Description Incident: (Location, ir sustained, h you feel)	njuries		

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