**Anti-Social Behaviour Report Form**

To be used when employees encounter disruptive, inappropriate, or unsafe behaviour from customers, clients, or the general public.

Reporter Details

|  |  |
| --- | --- |
| Full Name |  |
| Role/Job Title |  |
| Contact Number |  |
| Date of Report (DD/MM/YYYY) |  |

Incident Details

|  |  |
| --- | --- |
| Date of Incident (DD/MM/YYYY) |  |
| Time of Incident (24:00) |  |
| Location of Incident |  |
| Name(s) and/or Description of Person(s) involved (if known) |  |

Type of Anti-Social Behaviour (tick all that apply)

☐ Verbal abuse

☐ Intimidation

☐ Substance misuse

☐ Smoking/Vaping

☐ Refusal to follow instructions

☐ Disorderly conduct

☐ Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Immediate Action Taken (tick if completed)

☐ Pressed anti-social behaviour alert / emergency button

☐ Reported via internal communication system

☐ Attempted de-escalation

☐ Requested police/security support

☐ Completed near miss report (if ongoing hotspot)

☐ Informed supervisor or manager

☐ CCTV requested

Further notes or description of behaviour

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_