Middle Georgia State College Police
Bomb Threat Report Form

THREATENING PHONE CALL

Time call received: _____ Date: _____

Exact words of person making the call:

_____

QUESTIONS TO ASK:

When is the bomb going to explode?

Where is the bomb right now?

What kind of bomb is it?

What does it look like?

Why did you place the bomb?

What is your name?

Are you a student?

_____

Department where call was received:
_____

Telephone number where call was received:
_____or_____ow1(_____)11(_____)11(/MCID 16 >>B