## **COLUMBIA COLLEGE Threat Assessment Form**

NOTE:

Clarification of Terms
These words or phrases indicate actions or activities that are essential or mandatory.
This word implies that it is highly desirable to perform certain actions or activities, but not essential or mandatory.
These words imply freedom or liberty to follow an alternative to the action or activity being presented in a document. Must; Shall; Will: Should: May or Could; Can:

Name of Assessed:				Date:	
Administered by:				Case#:	
Coding:	0 – Not Present	1 – Maybe Present	2 – Definitely Present		

Clinical Items		CODING 0, 1, 2
1.	Negative Attitudes/Physical Appearance Drastic Change in School	
2.	Active Symptoms of Major Mental illness -Provisional until confirmed by mental health evaluation	
3.	Evidence of preoccupation in violence	
4.	Family instability/criminality	
5.	Plans lack feasibility	
6.	Access to weapons/attempts to garner weapons	
7.	Non-Compliance with Remediation Attempts/Hostility	
8.	Current / Increase in Stress	
9.	Evidence of depression	
10.	Has been rejected by Peers	
11.	Described as a Risk Taker/Impulsive	
12.	Evidence of Stress & poor coping skills	
13.	Anger management problems (blow ups)	
14.	History of self harm/suicide attempts	
15.	Has uttered specific threats (proven or reported)	
16.	Active Substance Abuse	

\*\*\*Shaded areas should be considered areas of special concern\*\*\*

Other Considerations				
01				
O2				
O3				
O4				
TOTAL		/32		
OVERRIDE This area allows officer(s) to express any concerns not addressed by the coding sheet				

Low - 0 - 9	Final Risk Judgment	Low	Moderate	High	
Moderate 10-21					
High 22-32					
	Referred to TAT	YES		NO	
COMMENTS					

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Revision #1 NOTE: Revisions to this document can be made following procedures outlined in Document #ADM-P014 – Document Control Policy and Procedures