

BAKERSFIELD COLLEGE

BOMB THREAT Post Near Telephone

Bakersfield College
Department of Public Safety

(661) 395-4554
1801 Panorama Drive
Bakersfield, CA 93305

CALLER'S VOICE:

- | | |
|-----------------------------------|--|
| <input type="checkbox"/> Calm | <input type="checkbox"/> Nasal |
| <input type="checkbox"/> Angry | <input type="checkbox"/> Stutter |
| <input type="checkbox"/> Excited | <input type="checkbox"/> Lisp |
| <input type="checkbox"/> Slow | <input type="checkbox"/> Raspy |
| <input type="checkbox"/> Rapid | <input type="checkbox"/> Deep |
| <input type="checkbox"/> Soft | <input type="checkbox"/> Ragged |
| <input type="checkbox"/> Loud | <input type="checkbox"/> Clearing Throat |
| <input type="checkbox"/> Laughter | <input type="checkbox"/> Deep Breathing |
| <input type="checkbox"/> Crying | <input type="checkbox"/> Cracking Voice |
| <input type="checkbox"/> Normal | <input type="checkbox"/> Disguised |
| <input type="checkbox"/> Distinct | <input type="checkbox"/> Accent |
| <input type="checkbox"/> Slurred | <input type="checkbox"/> Familiar |

If voice is familiar, who did it sound like?

QUESTIONS TO ASK:

1. When is bomb going to explode?
2. Where is it right now?
3. What does it look like?
4. What kind of bomb is it?
5. What will cause it to explode?
6. Did you place the bomb?
7. Why?
8. What is your address?
9. What is your name?

EXACT WORDING OF THE THREAT:

Sex of caller: _____ Race: _____

Age: _____ Length of call: _____

Number at which call is received:

Time: _____ Date: _____

BACKGROUND SOUNDS:

- | | |
|---|--|
| <input type="checkbox"/> Office Machinery | <input type="checkbox"/> Factory Machinery |
| <input type="checkbox"/> Street Noises | <input type="checkbox"/> Animal Noises |
| <input type="checkbox"/> Crockery | <input type="checkbox"/> Clear |
| <input type="checkbox"/> Voices | <input type="checkbox"/> Static |
| <input type="checkbox"/> PA System | <input type="checkbox"/> Local |
| <input type="checkbox"/> Music | <input type="checkbox"/> Long Distance |
| <input type="checkbox"/> House | <input type="checkbox"/> Booth |
| <input type="checkbox"/> Motor | <input type="checkbox"/> Other _____ |

THREAT LANGUAGE:

- | | |
|--|--|
| <input type="checkbox"/> Well Spoken
(Educated) | <input type="checkbox"/> Message read by
threat maker |
| <input type="checkbox"/> Foul | <input type="checkbox"/> Incoherent |
| <input type="checkbox"/> Irrational | <input type="checkbox"/> Taped |

Remarks: _____

**Report call immediately to:
Department of Public Safety
(661) 395-4554/4555**

Date: _____

Name: _____

Position: _____