



VICTORIA POLICE

NEIGHBOURHOOD WATCH AREA MEETING REPORT

NHW Area Details:

Area No: Meeting Date: Meeting Time:
Meeting Venue:
No. of Civilians Attending: Date of Next Meeting:

NHW Area Coordinator:

Name:
Address:
Phone: Fax:

Police Member Submitting This Form:

Name: Rank: Reg. No:
Station:
Did Police Attend This Meeting? Yes / No
No of Members Attended: Time Spent at Meeting:

If Police Did Not Attend This Meeting, Please Complete:

Was the Area Crime Report made available? Yes / No
When & How?
Was the Area advised that Police would not be attending? Yes / No
When & How?
Reasons for non attendance:
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Detail any issues for attention of Divisional NHW Coordinator:

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NB: This form must be received at the Divisional NHW Coordinator's Office within 7 days of the meeting being held.