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Police Executive Research Forum  
RETURN 1120 Connecticut Ave., NW  
TO: Suite 930  
Washington, DC 20036

FORM CJ-44L  
2007 SURVEY OF STATE AND LOCAL LAW  
ENFORCEMENT AGENCIES  
Law Enforcement Management and Administrative Statistics  
U.S. Department of Justice, Bureau of Justice Statistics

**IMPORTANT: Please read the instructions below prior to completing this questionnaire.**

- There are three ways to submit this survey:
  - 1) Complete the survey online at <http://survey.policeforum.org/LEMASCI44L.pdf>  
If you choose to complete the survey via the Internet, you will be prompted to enter your USER NAME and PASSWORD, which are included on the cover letter accompanying this questionnaire. You will also have to enter your ID NUMBER on the first page of the survey, which is located at the top right of this page. Without entering your agency's USER NAME, PASSWORD, and ID NUMBER, you will not be able to complete the survey online. The USER NAME and PASSWORD provide a secure location to submit your survey.
  - 2) Mail the survey to PERF using the enclosed postage-paid envelope.
  - 3) Fax the survey to PERF at 202-466-7826.
- Please retain a copy of the completed survey for your records.
- Please use either blue or black ink and print as neatly as possible using only CAPITAL letters.
- Do not leave any items blank.
  - If the answer to a question is not available or is unknown, write "DK" (don't know) in the space provided.
  - If the question is not applicable, write "NA" in the space provided.
  - If the answer to a question is none or zero, write "0" in the space provided.
  - When exact numeric answers are not available, provide estimates.
- Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.
- If you have any questions or need assistance in completing the questionnaire, please contact Bruce Kubu of the Police Executive Research Forum (PERF) by phone at 202-454-8308 or by email at [bkubu@policeforum.org](mailto:bkubu@policeforum.org). If you have general comments or suggestions for improving the survey, please contact Brian Reaves of the Bureau of Justice Statistics by phone at 202-616-3287 or by email at [Brian.Reaves@usdoj.gov](mailto:Brian.Reaves@usdoj.gov).

PLEASE SUBMIT

FEB 22 2008

THE SURVEY BY

COMPLETED

**Burden Statement**

Federal agencies may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB Control Number. Public reporting burden for this collection of information is estimated to average three hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate, or any other aspects of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. The Omnibus Crime Control and Safe Streets Act of 1968, as amended (42 USC 3732), authorizes this information collection. Although this survey is voluntary, we urgently need your cooperation to make the results comprehensive, accurate, and timely. We greatly appreciate your assistance.

**INFORMATION SUPPLIED BY:**

NAME [REDACTED]

TITLE CHIEF DEPUTY

AGENCY SAN LUIS OBISPO SHERIFF DEPARTMENT

TELEPHONE (805) 781-4580 EXT. [REDACTED]

FAX NUMBER (805) 781-1075

EMAIL [REDACTED]@CO.SLO.CA.US

## SECTION I - DESCRIPTIVE INFORMATION

\*\*\*Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.\*\*\*

1. Enter the number of **AUTHORIZED** full-time paid agency positions and **ACTUAL** full-time and part-time paid agency employees as of September 30, 2007. Full-time employees are those regularly scheduled for 35 or more hours per week. If none, enter '0.'

	AUTHORIZED full-time paid positions	ACTUAL paid agency employees	
		Full-time	Part-time
a. Sworn personnel with general arrest powers	164	163	0
b. Officers/deputies with limited or no arrest powers (e.g., jail or court officers in some agencies)	<input type="checkbox"/>	125	0
c. Non-sworn employees	<input type="checkbox"/>	105	2
d. TOTAL (sum of lines 'a' through 'c')	<input type="checkbox"/>	393	2

2. As of September 30, 2007, how many reserve/auxiliary officers did your agency have? If none, enter '0.'

Reserve/auxiliary officers	Sworn	Full-time	Part-time
	Non-sworn	0	9
		0	1

3. As of September 30, 2007, how many **FULL-TIME SWORN** personnel with general arrest powers (as entered in 1a, column 2) did your agency have assigned to the following multi-agency task forces? Personnel may be counted more than once. If none, enter '0.'

Multi-agency task force	Assigned full-time	Assigned part-time
a. Gangs.....	2	0
b. Drugs.....	1	0
c. Anti-terrorism.....	0	1
d. Human trafficking.....	0	0

4. Of the total number of **FULL-TIME SWORN** personnel with general arrest powers (as entered in 1a, column 2), enter the number of each of the following: (Personnel may be counted more than once. If none, enter '0'.)

a. Uniformed officers with REGULARLY ASSIGNED DUTIES that include responding to citizen calls/requests for service	<input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> 7 <input type="checkbox"/> 4
b. Community Policing Officers, Community Relations Officers, or other sworn personnel specifically designated to engage in community policing activities	<input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> 0
c. School Resource Officers, School Liaison Officers, or other sworn personnel whose primary duties are related to school safety (exclude crossing guards)	<input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> 6

5. Enter the total number of **FULL-TIME SWORN** personnel with general arrest powers (as entered in 1a, column 2) who performed the following duties as their **PRIMARY** job responsibility. Count each officer only once. If none, enter '0.'

	Number
a. Patrol duties .....	<input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> 9 <input type="checkbox"/> 1
b. Investigative duties (e.g., detectives) .....	<input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> 1 <input type="checkbox"/> 6
c. Jail-related duties .....	<input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> 0
d. Court security duties .....	<input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> 1 <input type="checkbox"/> 7
e. Process serving duties .....	<input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> 5

6. Enter your agency's total operating budget for the 12-month period that includes September 30, 2007. If data are not available, provide an estimate and mark (■) the box below. Include jails administered by your agency. Do NOT include building construction costs or major equipment purchases.

\$ ☐ ☐ , ☐ 50 , 280 , 700

Please mark here if this figure is an estimation.... ☐

7. Enter the total estimated value of money, goods, and property received by your agency from an asset forfeiture program during calendar year 2006. If no money, goods or property were received, enter '0.'

a. Drug forfeiture program.....	\$ <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> 54 , 000
b. Gambling forfeiture program.....	\$ <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> 0
c. Other forfeiture program(s).....	\$ <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> 0

Please mark here if any of these figures are an estimation..... ☐

\*\*\*Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.\*\*\*

- ☐ Yes     ☒ No

- Physical agility/fitness test..... ☒ Yes ☐ No

- c. Total (sum of lines 'a' and 'b')

13. Enter the number of FULL-TIME agency personnel who were certified as bilingual as of September 30, 2007. If none, enter '0.'

a. Sworn personnel.....   ,     10

b. Non-sworn personnel.....   ,     19

14. During the 12-month period ending September 30, 2007, did your agency use any of the following for language interpretation services?

Sworn personnel..... ☒ Yes ☐ No

Non-sworn personnel..... ☒ Yes ☐ No

Volunteers..... ☐ Yes ☒ No

Private contractors..... ☐ Yes ☒ No

Other (please specify)..... ☐ Yes ☒ No

15. Does your agency authorize or provide any of the following for sworn personnel?

a. Education incentive pay..... ☒ Yes ☐ No

b. Hazardous duty pay..... ☒ Yes ☐ No

c. Merit/performance pay..... ☐ Yes ☒ No

d. Shift differential pay..... ☒ Yes ☐ No

e. Special skills proficiency pay..... ☐ Yes ☒ No

f. Bilingual ability pay..... ☒ Yes ☐ No

g. Tuition reimbursement..... ☐ Yes ☒ No

h. Military service pay..... ☒ Yes ☐ No

i. Collective bargaining rights..... ☒ Yes ☐ No

j. Residential incentive pay..... ☐ Yes ☒ No

16. Enter the salary schedule for the following FULL-TIME SWORN positions as of September 30, 2007. If a position does not exist on a full-time basis in your agency, enter 'NA.'

	Base ANNUAL salary	
	Minimum	Maximum
a. Chief executive (chief, director, sheriff, etc.)	182104	182104
b. Sergeant or equivalent first-line supervisor	77521	94224
c. Entry-level officer or deputy (post-academy)	63835	77584

### SECTION III - OPERATIONS

\*\*\*Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.\*\*\*

17. Does your agency participate in an operational 9-1-1 emergency telephone system (i.e., your agency's units can be dispatched as a result of a call to 9-1-1)? Mark (■) only one response.

☒ Yes - Enhanced 9-1-1 system

☐ Yes - Basic 9-1-1 system

☐ No - SKIP to Question 19

18. Does your agency's 9-1-1 system have the following capabilities for incoming calls from wireless/cellular phones?

Can display phone number of wireless caller..... ☒ Yes ☐ No

Can display *exact* location of wireless caller..... ☐ Yes ☒ No

Can display *general* location of wireless caller..... ☐ Yes ☒ No

19. During the 12-month period ending September 30, 2007, did your agency use the following types of patrol on a REGULARLY SCHEDULED basis?

Automobile..... ☒ Yes ☐ No

Motorcycle..... ☐ Yes ☒ No

Foot..... ☐ Yes ☒ No

Aviation..... ☐ Yes ☒ No

Marine..... ☒ Yes ☐ No

Horse..... ☐ Yes ☒ No

Bicycle..... ☒ Yes ☐ No

Human transporter (e.g., Segway)..... ☐ Yes ☒ No

Other (please specify)..... ☐ Yes ☒ No



**SECTION V - EMERGENCY PREPAREDNESS**

\*\*\*Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.\*\*\*

24. Does your agency have a written plan that specifies actions to be taken in the event of terrorist attacks? (Include emergency operation plans that would be applicable to such an attack.)

☒ Yes ☐ No

25. Do the public safety agencies operating in or nearby your jurisdiction (including your agency) use a shared radio network infrastructure that achieves interoperability?

☒ Yes ☐ No

26. In which of the following terrorism preparedness activities did your agency engage during the period ending September 30, 2007?

Partnership with culturally diverse communities..... ☒ Yes ☐ No

Public anti-fear campaign..... ☐ Yes ☒ No

Dissemination of information to increase citizen preparedness..... ☒ Yes ☐ No

Community meetings on homeland security/preparedness..... ☒ Yes ☐ No

Increased sworn officer presence at critical areas..... ☒ Yes ☐ No

Emergency preparedness exercises..... ☒ Yes ☐ No

Other (please specify)..... ☐ Yes ☒ No

27. Of the total number of actual FULL-TIME personnel, how many are intelligence personnel with primary duties related to terrorist activities? If none, enter '0.'

Intelligence personnel with primary duties related to terrorist activities.....

Sworn	Non-sworn
<input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="1"/>	<input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>

**SECTION VI - EQUIPMENT**

\*\*\*Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.\*\*\*

- 28a. Which types of sidearms are authorized for use by your agency's field/patrol officers? Mark (■) all that apply.

**On-duty weapons**

Semiautomatic:	Primary sidearm	Backup sidearm
10mm.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
9mm.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
.45.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
.40.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
.357.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
.380.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other caliber.....	<input type="checkbox"/>	<input type="checkbox"/>
Any semiautomatic, as long as they qualify.....	<input type="checkbox"/>	<input type="checkbox"/>
Revolver.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
		No backup sidearm is authorized..... <input type="checkbox"/>

- b. Which types of secondary firearms systems does your agency issue to patrol officers or authorize for their use? Mark (■) all that apply.

☒ Assault weapon (e.g., AR-15)

☒ Shotgun

☐ Carbine

☐ Rifle

☐ Other (please specify)

☐ Not applicable--no secondary firearms systems authorized

29. Are your agency's uniformed field/patrol officers REQUIRED to wear protective body armor while in the field? Mark (■) only one response.

☐ Yes, all the time

☐ Yes, in some circumstances (e.g., serving warrants)

☒ No

30. Enter the number of animals regularly maintained by your agency for use in activities related to law enforcement. If none, enter '0.'

Dogs         Horses

31. Which of the following types of less-than-lethal weapons or actions are authorized for use by your agency's field/patrol officers? Exclude weapons used only by tactical units.

a. Impact devices

- Traditional baton..... ☒ Yes ☐ No  
PR-24 baton..... ☒ Yes ☐ No  
Collapsible baton..... ☒ Yes ☐ No  
Soft projectile (e.g., bean-bag)..... ☒ Yes ☐ No  
Blackjack/slapjack..... ☐ Yes ☒ No  
Rubber bullet..... ☐ Yes ☒ No  
Other impact device (please specify)..... ☐ Yes ☒ No

b. Chemical agents

- OC (pepper spray/foam)..... ☒ Yes ☐ No  
Other chemical agent (please specify)..... ☐ Yes ☒ No

c. Other weapons/actions

- Conducted energy device (e.g., stun gun, Taser, Stinger)..... ☐ Yes ☒ No  
Hold or neck restraint (e.g., carotid hold)..... ☒ Yes ☐ No  
Other weapon/action (please specify)..... ☒ Yes ☐ No  

PEPPER BALL

32. As of September 30, 2007, did your agency use any of the following technologies on a regular basis? Mark ( ☒ ) all that apply.

Digital imaging

- Fingerprints (e.g., AFIS)..... ☒ Facial recognition..... ☐  
Mug shots..... ☒ Digital photography..... ☒  
Suspect composites..... ☐ None of the listed digital imaging technologies..... ☐

Night vision/electro-optic

- Infrared (thermal) imagers..... ☒ Night vision goggles/binoculars..... ☒  
Image intensifiers..... ☐ License plate readers..... ☐  
Laser range finders..... ☐ None of the listed night vision/electro-optic technologies..... ☐

Vehicle stopping/tracking

- Electrical/engine disruption..... ☐ Tire deflation devices..... ☒  
Stolen vehicle tracking (e.g., LoJack)..... ☐ None of the listed vehicle stopping/tracking technologies..... ☐

33. Enter the total number of motorized vehicles operated by your agency as of September 30, 2007. Include owned, rented, leased and confiscated vehicles that your agency uses. If none, enter '0.'

Marked cars..... , 

3

2

  
Other marked vehicles (SUV, truck, van, etc.)..... , 

8

  
Unmarked cars..... , 

8

8

  
Other unmarked vehicles (SUV, truck, van, etc.)..... , 

2

0

  
Fixed-wing aircraft..... , 

0

  
Helicopters..... , 

0

  
Boats..... , 

2

  
Motorcycles..... , 

0

34a. Does your agency allow officers to take marked vehicles home?

☒ Yes ☐ No - SKIP to Question 35a

b. Does your agency allow officers to drive marked vehicles for personal use during off-duty hours?

☐ Yes ☒ No

c. Does your agency allow officers to drive marked vehicles outside of the jurisdiction during off-duty hours?

☐ Yes ☒ No

35a. During the 12-month period ending September 30, 2007, did your agency operate video cameras on a regular basis?

☒ Yes ☐ No - SKIP to Question 36

b. Enter the number of video cameras operated by your agency as of September 30, 2007. If none, enter '0.'

In patrol cars..... , 

3

2

  
Fixed-site surveillance in public areas..... , 

0

  
Mobile surveillance..... , 

0

36. During the 12-month period ending September 30, 2007, did your agency operate gunshot detection sensors on a regular basis?

☐ Yes If YES, how many?

☒ No →, 

NA

# SECTION VII - COMPUTERS AND INFORMATION SYSTEMS

\*\*\*Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.\*\*\*

37. Does your agency use computers for any of the following functions? Mark (■) all that apply.

- |  |  |
|--|--|
| <input type="checkbox"/> Analysis of community problems  | <input type="checkbox"/> In-field report writing                     |
| <input type="checkbox"/> Automated booking               | <input checked="" type="checkbox"/> Intelligence gathering           |
| <input checked="" type="checkbox"/> Crime analysis       | <input checked="" type="checkbox"/> Inter-agency information sharing |
| <input type="checkbox"/> Crime mapping                   | <input checked="" type="checkbox"/> Internet access                  |
| <input checked="" type="checkbox"/> Crime investigations | <input checked="" type="checkbox"/> Personnel records                |
| <input checked="" type="checkbox"/> Dispatch (CAD)       | <input checked="" type="checkbox"/> Records management               |
| <input type="checkbox"/> Fleet management                | <input checked="" type="checkbox"/> Resource allocation              |
| <input type="checkbox"/> Hotspot identification          | <input type="checkbox"/> NONE of the listed functions                |
| <input type="checkbox"/> In-field communications         |  |

38. Does your agency maintain its own computerized files with any of the following information? Mark (■) all that apply.

- |  |  |
|--|--|
| <input type="checkbox"/> Alarms  | <input checked="" type="checkbox"/> Intelligence related to potential terrorist activity |
| <input checked="" type="checkbox"/> Arrests                                    | <input type="checkbox"/> Pawn shop data  |
| <input type="checkbox"/> Biometric data for use with facial recognition system | <input checked="" type="checkbox"/> Protection orders                                    |
| <input checked="" type="checkbox"/> Calls for service                          | <input checked="" type="checkbox"/> Stolen property                                      |
| <input type="checkbox"/> Citizen complaints against officers/agency            | <input type="checkbox"/> Summonses   |
| <input checked="" type="checkbox"/> Fingerprints                               | <input checked="" type="checkbox"/> Traffic citations                                    |
| <input checked="" type="checkbox"/> Gangs                                      | <input checked="" type="checkbox"/> Traffic stops  |
| <input checked="" type="checkbox"/> Incident reports                           | <input type="checkbox"/> Use of force incidents  |
| <input type="checkbox"/> Illegal attempts to purchase firearms                 | <input checked="" type="checkbox"/> Warrants   |
|  | <input type="checkbox"/> NONE of the listed files  |

39. Do any of your agency's field/patrol officers use computers or terminals WHILE IN THE FIELD?

- ☐ Yes ☒ No -- SKIP to Question 41

↳ If YES, how many of the following types of computers/terminals are available for use by your agency's field/patrol officers WHILE IN THE FIELD? If none, enter '0.'

Permanent vehicle-mounted computers/terminals:   ,   NA

Portable computers/terminals used with vehicle docking stations:   ,   NA

Portable computers/terminals NOT used with vehicle docking stations:   ,   NA

40. Do any of your agency's field/patrol officers have direct access to the following types of information using IN-FIELD vehicle-mounted or portable computers?

- |   |                              |  |
|---|------------------------------|--|
| Motor vehicle records.....                            | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Driving records.....                                  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Criminal history records.....                         | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Warrants.....   | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Protection orders.....                                | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Inter-agency information system.....                  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Address history (e.g., repeat calls for service)..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Internet access.....                                  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| GIS/crime mapping.....                                | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Other (please specify).....                           | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

41. How are data from criminal incident reports PRIMARILY transmitted to your agency's central information system? Mark (■) only one response.

- ☒ Paper report
- ☐ Voice (cellphone, telephone, recording, radio)
- ☐ Computer/data device
- ☐ Other (please specify)
- ☐ Not applicable - agency does not handle such reports

42. Does your agency own or have access to an Automated Fingerprint Identification System (AFIS) that includes a file of digitized prints? Mark (■) all that apply.

- ☒ Agency is exclusive/shared owner of an AFIS system
- ☐ Agency has access to a remote AFIS system
- ☐ Agency has access to AFIS through another agency
- ☐ None of the above

43. Does your agency have an operational computer-based personnel performance monitoring/assessment system (e.g., Early Warning or Early Intervention System) for monitoring or responding to problematic officer behavior patterns?

- ☐ Yes ☒ No



## SECTION VIII - SPECIAL PROBLEMS/TASKS

\*\*\*Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.\*\*\*

44. How does your agency address the following problems/tasks? Mark (■) the appropriate box for each problem/task listed below. Mark only one box per line.

Type of problem/task	(1) Agency HAS specialized unit with personnel assigned <u>FULL-TIME</u> to address this problem/task	Agency DOES NOT HAVE a specialized unit with full-time personnel		
		(2) Agency has designated personnel to address this problem/task	(3) Agency addresses this problem/task, but does not have designated personnel	(4) Agency does not formally address this problem/task
a. Auto theft	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Bias/hate crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. Bomb/explosive disposal	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Child abuse/endangerment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Community crime prevention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Crime analysis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Cybercrime	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Domestic violence	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Drug education in schools	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Financial crimes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Drug enforcement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Gangs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Impaired drivers (DUI/DWI)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
n. Internal affairs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Juvenile crime	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Methamphetamine labs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Missing children	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. Repeat offenders	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. Research and planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
t. School safety	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
u. Terrorism/homeland security	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Victim assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

\*\*\*Unless otherwise noted, please answer all questions using September 30, 2007, as a reference.\*\*\*

### Officer conduct

- a. Use of deadly force/firearm discharge.....☒ Yes ☐ No
- b. Use of less-than-lethal force.....☒ Yes ☐ No
- c. Code of conduct and appearance.....☒ Yes ☐ No
- d. Off-duty employment.....☒ Yes ☐ No
- e. Maximum work hours allowed.....☐ Yes ☒ No
- f. Off-duty conduct.....☒ Yes ☐ No
- g. Interacting with the media.....☒ Yes ☐ No
- h. Employee counseling assistance.....☒ Yes ☐ No

i. Mentally ill persons.....☒ Yes ☐ No

j. Homeless persons.....☐ Yes ☒ No

k. Domestic disputes.....☒ Yes ☐ No

l. Juveniles.....☒ Yes ☐ No

m. Persons with limited English proficiency....☐ Yes ☒ No

n. Collection of information on in-custody deaths..... ☒ Yes ☐ No

o. Racial profiling..... ☐ Yes ☒ No

p. Citizen complaints..... ☒ Yes ☐ No

q. Checking of immigration status by patrol officers..... ☐ Yes ☒ No

☐ Prohibition (prohibits all pursuits)

☐ Discouragement (discourages all pursuits)

☐ Judgmental (leaves decisions to officer's discretion, such as type of offense, speed, etc.)

☒ Restrictive (restricts decisions of officers to specific criteria)

☐ Other (please specify)

☐ Agency does not have a written policy pertaining to pursuit driving

d. TOTAL use of force complaints received (sum of lines 'a' through 'c')      

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, 

		3
--	--	---

☐ Yes    ☐ No☐ Yes    ☒ No

**\*\*\*Please retain a copy of the  
completed survey for your  
records.\*\*\***