**USE OF FORCE REPORT**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Call Number** | **Case Number** | **Location** | **Date** | **Time** |
| Associated Reports: [ ]  Arrest [ ]  Offense [ ]  Incident  |
| **REPORT IS TO BE COMPLETED BY PRIMARY DISPATCHED OFFICER; OTHERWISE, BY FIRST OFFICER TO USE FORCE** |
| **Name of Officer Completing Report** | **Signature** | **Date** | **Time** |
|  **POEC/Emergency Detention Order** [ ]  **NO FORCE WAS USED BUT FORCE WAS ALLEGED** [ ]  |
| **Officer Data** |
| **Officer (A)** (Last, First Middle) | ID Number | Division |
| Race | Sex | Age | Height | Weight     | On Duty: [ ]  Yes [ ]  NoIn Uniform: [ ]  Yes [ ]  No | Injury: [ ]  Yes [ ]  NoInjury Report: [ ]  Yes [ ] No |
| **Officer (B)** (Last, First Middle) | ID Number | Division |
| Race | Sex | Age | Height  | Weight      | On Duty: [ ]  Yes [ ]  NoIn Uniform: [ ]  Yes [ ]  No | Injury: [ ]  Yes [ ]  NoInjury Report: [ ]  Yes [ ] No |
| **Officer (C)** (Last, First Middle) | ID Number | Division |
| Race | Sex | Age | Height | Weight      | On Duty: [ ]  Yes [ ]  NoIn Uniform: [ ]  Yes [ ]  No | Injury: [ ]  Yes [ ]  NoInjury Report: [ ]  Yes [ ] No |
| **Subject Data** |
| **Subject Name 1** (Last, First Middle) / **University Affiliation****/** | Race | Sex | Age | Height     | Weight     |
| **Subject Name 2** (Last, First Middle) / **University Affiliation****/** | Race | Sex | Age | Height      | Weight      |
| **Subject Name 3** (Last, First Middle) / **University Affiliation****/** | Race | Sex | Age | Height      | Weight      |
| **Subject Actions** | **SUBJ 1** | **SUBJ 2** | **SUBJ 3** | **Subject Injury** | **SUBJ 1** | **SUBJ 2** | **SUBJ 3** |
| Cooperation | [ ]  | [ ]  | [ ]  | Death or Serious Bodily Injury | [ ]  | [ ]  | [ ]  |
| Passive Resistance | [ ]  | [ ]  | [ ]  | Injury | [ ]  | [ ]  | [ ]  |
| Verbal Resistance | [ ]  | [ ]  | [ ]  | Injury Complained, Not Observed | [ ]  | [ ]  | [ ]  |
| Empty Hand Defensive Resistance | [ ]  | [ ]  | [ ]  | No injury Complained or Observed | [ ]  | [ ]  | [ ]  |
| Empty Hand Active Aggression | [ ]  | [ ]  | [ ]  | **Subject Disposition** |  |
| Firearm | [ ]  | [ ]  | [ ]  | Admitted to Hospital | [ ]  | [ ]  | [ ]  |
| Other Weapon  | [ ]  | [ ]  | [ ]  | Treated and Released | [ ]  | [ ]  | [ ]  |
| Other (Specify)  | [ ]  | [ ]  | [ ]  | No Treatment Requested | [ ]  | [ ]  | [ ]  |
|  | Photographs Taken | [ ]  | [ ]  | [ ]  |
|  |
| **REASON FOR CONTACT:** | [ ]  Dispatched Call [ ]  Custody [ ]  On-View Offense / Incident [ ]  Traffic Stop [ ]  Other:   |
| **FORCE USED BY EACH OFFICER AGAINST EACH SUBJECT AND OUTCOME** |
| Use **E** (effective), **I** (ineffective) only in areas where force was applied. | Officer (A) and | Officer (B) and | Officer (C) and |
| SUBJ 1 | SUBJ 2 | SUBJ 3 | SUBJ 1 | SUBJ 2 | SUBJ 3 | SUBJ 1 | SUBJ 2 | SUBJ 3 |
| Verbal Commands |  |  |  |  |  |  |  |  |  |
| Passive Guidance or Control |  |  |  |  |  |  |  |  |  |
| Empty Hand Control - Soft |  |  |  |  |  |  |  |  |  |
| Empty Hand Control - Hard |  |  |  |  |  |  |  |  |  |
| OC Spray |  |  |  |  |  |  |  |  |  |
| Impact Weapon |  |  |  |  |  |  |  |  |  |
| Electronic Control Device  |  |  |  |  |  |  |  |  |  |
| Firearm: Exhibited  |  |  |  |  |  |  |  |  |  |
| Firearm: Used |  |  |  |  |  |  |  |  |  |
| Other: Specify in narrative |  |  |  |  |  |  |  |  |  |
| Other: Specify in narrative |  |  |  |  |  |  |  |  |  |
|  |
| **Call Number** | **Date** | **Time** |
|  |

Details:

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| **CHAIN OF COMMAND COMMENTS AND ACTION RECOMMENDATIONS** |
| **supervisor COMMENTS**      |
| **Signature and ID# Printed Name** | **Date** | **Time** |
| **Patrol Commander COMMENTS**     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Signature and ID# Printed Name** | **Date** | **Time** |
| **CHIEF OF POLICE’S COMMENTS**     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Signature and ID#** | **Date** | **Time** |