

RETURN TO

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2009 CENSUS OF PUBLICLY FUNDED  
 FORENSIC CRIME LABORATORIES



U.S. Department of Justice  
 Bureau of Justice Statistics  
 and (acting as data collection agent)  
 Urban Institute

In correspondence about this survey, please refer to the number at the top left of the address label. (On the label, please correct any error in name and mailing address.)

INFORMATION SUPPLIED BY

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Instructions

- Please answer all questions with reference to the forensic laboratory(s) specified on the label above. This census is directed to all **Publicly Funded Forensic Crime Laboratories** in the United States, defined as:
  - a laboratory either funded solely by government or whose parent organization is a government agency; and
  - one that employs one or more full time scientists\* whose principal function is the examination of physical evidence for law enforcement agencies and that provides reports and testimony to courts of law with respect to such evidence.
- For additional information, please refer to the **Help Text in Appendix A**. Item-specific directions are provided. A **glossary of terms** is provided in **Appendix B** for your reference.
- Some questions ask you to provide exact counts of staff persons in the laboratory or of types of evidence handled by the laboratory. If you are unable to provide an exact count in response to any such question, please contact the Help Desk.
- Please complete and return the survey **by November 30, 2010**.
- You may complete and return the survey in any of five ways:
  - Login to <https://cfcl.urban.org/> using the Agency Number and Password on the label above.
  - Fax the completed survey form to the Urban Institute at 202-659-8985.
  - Mail the completed form to the address in the upper left.
  - Upload the completed survey using the secured file transfer link once logged into the survey site under the upload tab at <https://cfcl.urban.org/upload/>.
  - Email your completed form to [cfcl@urban.org](mailto:cfcl@urban.org).
- When completing the survey online, you **do not need to complete this census all at once**, but can start and return to it as many times as necessary, using the buttons on the left to immediately return to specific sections of the form. You will have the option of saving and printing a copy of your data once you complete the census.
- If you have questions or concerns, or if you need assistance completing the survey, please contact the Urban Institute at [cfcl@urban.org](mailto:cfcl@urban.org) or call **202-261-5341**. Please call between 9:00 a.m. and 5:00 p.m. EST.

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 3 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.

**SECTION A: ORGANIZATION**

**A1. Which of the following best describes the jurisdiction served by your crime laboratory?**  
(check one)

- 1 City, borough, village, or town
- 2 County
- 3 State
- 4 Federal/National
- 5 Other (please specify below)

\_\_\_\_\_

**A2. Is your laboratory part of a multiple laboratory system?**

- 1 Yes
- 2 No → Skip to A4

**A3. How many laboratories are in this system?**

\_\_\_\_\_ laboratories

**A4. What organization has administrative control of your lab?**

*(For example: Utah Department of Public Safety, Hudson County Prosecutor, Vermont Department of Health)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**A5. What jurisdiction or geographic area does your laboratory serve?** *(For example: Los Angeles County, New York City, Illinois State)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**A6. In what year was the laboratory established?**

\_\_\_\_\_

**A7. In what year was your present laboratory facility constructed?**

\_\_\_\_\_

**A8. Have there been any major modifications or improvements in your facility since 2005?**

- 1 Yes
- 2 No

**A9. Please indicate if your crime laboratory performs the following forensic functions (including specific sub-categories where requested).**

Yes No

1 2 a. Controlled Substances

1 2 b. Toxicology (General)

↳ If YES, check all specific functions that apply:

- 1 Antemortem BAC Only
- 2 Antemortem BAC and Drugs
- 3 Postmortem

1 2 c. Trace (General)

↳ If YES, check all specific functions that apply:

- 1 Gunshot Residue Testing
- 2 Hair Examination
- 3 Fiber Examination
- 4 Fire Debris Analysis
- 5 Explosives Analysis
- 6 Paint Analysis
- 7 Chemical Unknown
- 8 Other Trace (please specify below)

\_\_\_\_\_

1 2 d. Impressions (General)

↳ If YES, check all specific functions that apply:

- 1 Footwear
- 2 Tire tread

1 2 e. Firearms/Toolmarks

1 2 f. Digital & Multimedia Evidence

1 2 g. Latent Prints *(Do not include 10-print input)*

↳ If YES, check all specific functions that apply:

- 1 Print Development
- 2 Comparisons

1 2 h. Questioned Documents

1 2 i. Forensic Biology  
*(Includes Biology Screening & DNA Analysis)*

1 2 j. Crime Scene

↳ If YES, check all specific functions that apply:

- 1 Evidence collection
- 2 Reconstruction

1 2 k. Other (please specify below)

*If YES to "other," specify one discipline per line below. Please refer to Appendix C for further instruction.*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**SECTION B: BUDGET**

This section includes budgetary questions regarding **your individual laboratory site**. We require a separate response for each laboratory. However, **if your laboratory is part of a multiple laboratory system**, please refer to the Help Text for possible solutions.

**B1. What was your total annual budget from ALL funding sources, including hard sources (repetitive) and soft sources (one-time special project/purpose funding), for laboratory operations during the 2009 budget year? (If you are unable to provide the exact amount, please provide your best estimate.)**

Do NOT include costs of outsourcing to other facilities here.

**Total 2009 laboratory budget**

\$ \_\_\_\_\_ .00       Estimate

**Please check box, if applicable.**

I am unable to provide the 2009 budget for my individual laboratory and the budgetary amount above includes the entire multiple laboratory system.

**Please indicate whether this is the Fiscal or Calendar Year budget**

<sub>1</sub> Fiscal Year → Please enter the start and end dates of the 2009 fiscal year (FY)  
\_\_\_\_\_ to \_\_\_\_\_  
mm dd yyyy      mm dd yyyy

<sub>2</sub> Calendar Year

**B2. Please indicate approximate total budgeted amounts dedicated to each of the following areas during the 2009 budget year. These are some of the budget categories used in Federal OJP Grant Applications. Personnel includes the fringe benefits category.**

- a. Personnel \$ \_\_\_\_\_ .00  
(including Fringe Benefits)
- b. Equipment \$ \_\_\_\_\_ .00
- c. Supplies \$ \_\_\_\_\_ .00

**B3. Please indicate whether a portion of your laboratory's funding came from each of the following sources during the 2009 budget year and if so, the amount received from each of type of grant. (If none, enter "0".)**

- a. Fees      <sub>1</sub> Yes      <sub>2</sub> No
- b. Grants      <sub>1</sub> Yes      <sub>2</sub> No

If YES, please specify the amount for each type of grant:

- 1. Federal \$ \_\_\_\_\_ .00
- 2. State \$ \_\_\_\_\_ .00
- 3. Other \$ \_\_\_\_\_ .00

**SECTION C: STAFF**

Full-time equivalent (FTE): An employee is full-time if they are expected to work 40 hours per week. For each part-time employee, round to the nearest tenth (0.1 FTE).

**C1. As of December 31, 2009, how many FTE (full-time equivalent) positions were authorized (funding not necessarily secured) at your laboratory? Please account for all types of employees. (Round to the nearest tenth.)**

\_\_\_\_\_ employees

**C2. As of December 31, 2009, how many FTE positions were funded (but not necessarily filled) at your laboratory? Please account for all types of employees. (Round to the nearest tenth.)**

\_\_\_\_\_ employees

**C3. As of December 31, 2009, how many FTE employees did you have actually working in each of the following types of positions? Please account for all types of employees. (If none, enter "0". Round to the nearest tenth.)**

Managerial a. \_\_\_\_\_  
(e.g., lab director, supervisor, QA manager)

Clerical/Administrative Support b. \_\_\_\_\_  
(e.g., quality assurance, IT)

Analyst/Examiner c. \_\_\_\_\_  
Entry-level or no experience necessary; personnel who examine evidence

Analyst/Examiner d. \_\_\_\_\_  
Intermediate/Senior-level with some experience to full journeyman with no supervisory requirement; personnel who examine evidence

Technical Support e. \_\_\_\_\_  
(e.g., lab technician, lab support personnel)

Crime Scene Technician f. \_\_\_\_\_

Other (please specify below)

Type of Position	# of FTEs
1. _____	g. _____
2. _____	h. _____

**TOTAL FTEs (sum a—h)** i. \_\_\_\_\_

C4-C6. What is the allowable full-time yearly salary range (without benefits or overtime) for the following positions (or equivalent) in your laboratory?

	C4. Minimum	C5. Maximum	C6. No such Position
a. <u>Director</u>	\$ _____ .00	\$ _____ .00	<input type="checkbox"/> <sub>99</sub>
b. <u>Supervisor</u>	\$ _____ .00	\$ _____ .00	<input type="checkbox"/> <sub>99</sub>
c. <u>Analyst/Examiner</u> Entry-level or no experience necessary	\$ _____ .00	\$ _____ .00	<input type="checkbox"/> <sub>99</sub>
d. <u>Analyst/Examiner</u> Senior-level or full journeyman with no supervisory requirement.	\$ _____ .00	\$ _____ .00	<input type="checkbox"/> <sub>99</sub>
e. <u>Technical Support</u> (e.g., lab technician, lab support personnel, etc.)	\$ _____ .00	\$ _____ .00	<input type="checkbox"/> <sub>99</sub>
f. <u>Researchers Only</u>	\$ _____ .00	\$ _____ .00	<input type="checkbox"/> <sub>99</sub>

C7. During 2009, were any FTE hours furloughed by your laboratory due to budgetary constraints?

- <sub>1</sub> Yes  
<sub>2</sub> No

### SECTION D: WORKLOAD

D1. A Laboratory Information Management System (LIMS) is a computerized system used to manage, compile or track requests and/or evidence. Does your lab have a LIMS?

- <sub>1</sub> Yes  
<sub>2</sub> No → Skip to D3

D2. What functions does your laboratory use in LIMS?

- Yes No
- <sub>1</sub> <sub>2</sub> a. Sample Tracking
- <sub>1</sub> <sub>2</sub> b. Case Tracking
- <sub>1</sub> <sub>2</sub> c. Instrument Tracking
- <sub>1</sub> <sub>2</sub> d. Backlog Reporting
- <sub>1</sub> <sub>2</sub> e. Chain of Custody
- <sub>1</sub> <sub>2</sub> f. Case Outcomes
- <sub>1</sub> <sub>2</sub> g. Report Generation
- <sub>1</sub> <sub>2</sub> h. Quality Assurance Document Management
- <sub>1</sub> <sub>2</sub> i. Audit Trail
- <sub>1</sub> <sub>2</sub> j. Other (please specify below)
- \_\_\_\_\_
- \_\_\_\_\_

D3. A case is defined as evidence submitted from a single criminal investigation. How many cases did your laboratory receive from January 1, 2009 through December 31, 2009?

\_\_\_\_\_ cases received

D4. A backlogged case is a case that is in the laboratory and remains unreported for a period of 30 days or more. As of January 1, 2010, how many backlogged cases did your laboratory have?

\_\_\_\_\_ backlogged cases

D5. What types of advanced technologies and procedures did your laboratory use in 2009?

- Yes No
- <sub>1</sub> <sub>2</sub> a. Y-STR Analysis
- <sub>1</sub> <sub>2</sub> b. Mitochondrial DNA Analysis
- <sub>1</sub> <sub>2</sub> c. Robotics
- <sub>1</sub> <sub>2</sub> d. Use of Expert Systems
- <sub>1</sub> <sub>2</sub> e. LC- MS/MS for Toxicology
- <sub>1</sub> <sub>2</sub> f. UPLC for Toxicology
- <sub>1</sub> <sub>2</sub> g. UPLC for Controlled Substances
- <sub>1</sub> <sub>2</sub> h. Laser Microdissection
- <sub>1</sub> <sub>2</sub> i. Polynomial Texture Mapping

D6. What types of databases did your laboratory use in 2009?

- Yes No
- <sub>1</sub> <sub>2</sub> a. Paint Data Query (PDQ)
- <sub>1</sub> <sub>2</sub> b. National Integrated Ballistics Information Network (NIBIN)
- <sub>1</sub> <sub>2</sub> c. Combined DNA Index System (CODIS)
- <sub>1</sub> <sub>2</sub> d. Automated Fingerprint Identification System (AFIS)

D7. Did your laboratory enter and search bullets in 2009?

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>99</sub> Not applicable, do not perform functions related to Firearms and Toolmarks

**D8-D17. In the tables that follow we are asking for 8 different elements of information about each of the general disciplines, and associated with forensic laboratories (listed below).**

Do NOT include outsourced requests in the following questions.

Please note that there are some substantive element differences in a few of the disciplines below.

The 8 different elements of information include:

- a. Total number of all **pending requests** awaiting analysis as of **January 1, 2009**;
- b. Number of these pending requests that were **backlogged** (requests unreported for 30 days or longer) as of **January 1, 2009**;
- c. Total number of **new requests** received in 2009;
- d. Total number of requests **completed** in 2009;
- e. Number of **FTEs** it took to complete the requests (as reported in item d);
- f. Total number of all **pending requests** awaiting analysis as of **January 1, 2010**;
- g. Number of these pending requests that were **backlogged** (requests unreported for 30 days or longer) as of **January 1, 2010**; and
- h. Current **average turnaround time** (in days) for requests. (Round to the nearest full day)

**NOTE:** A single case may result in multiple requests (e.g., one case may include: a request for forensic biology, AND a request for latent prints). The single request for forensic biology may include multiple items to be analyzed for biological fluids.

Please enter a response for **EVERY ITEM** in each table under the **GENERAL** forensic functions that your laboratory performs. If there were **NO REQUESTS** in a particular category, enter "0". If the discipline is **NOT APPLICABLE** to your laboratory, check the "NA" box.

Discipline Areas:	D8. CONTROLLED SUBSTANCES	D9. TOXICOLOGY	D10. TRACE	D11. IMPRESSIONS
DISCIPLINE NOT APPLICABLE	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99
a. Total number of all <b>pending requests</b> awaiting analysis as of <b>January 1, 2009</b> ;	a. _____	a. _____	a. _____	a. _____
b. Number of these pending requests that were <b>backlogged</b> (requests unreported for 30 days or longer) as of <b>January 1, 2009</b> ;	b. _____	b. _____	b. _____	b. _____
c. Total number of <b>new requests</b> received in 2009;	c. _____	c. _____	c. _____	c. _____
d. Total number of requests <b>completed</b> in 2009;	d. _____	d. _____	d. _____	d. _____
e. Number of <b>FTEs</b> it took to complete the requests (as reported in item d);	e. _____	e. _____	e. _____	e. _____
f. Total number of all <b>pending requests</b> awaiting analysis as of <b>January 1, 2010</b> ;	f. _____	f. _____	f. _____	f. _____
g. Number of these pending requests that were <b>backlogged</b> (requests unreported for 30 days or longer) as of <b>January 1, 2010</b> ; and	g. _____	g. _____	g. _____	g. _____
h. Current <b>average turnaround time</b> (in days) for requests. (Round to the nearest full day)	h. _____	h. _____	h. _____	h. _____

Discipline Areas:	D12. FIREARMS / TOOLMARKS	D13. DIGITAL & MULTI- MEDIA EVIDENCE	D14. LATENT PRINTS	D15. QUESTIONED DOCUMENTS
DISCIPLINE NOT APPLICABLE	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99
a. Total number of all <b>pending requests</b> awaiting analysis as of <b>January 1, 2009</b> ;	a. _____	a. _____	a. _____	a. _____
b. Number of these pending requests that were <b>backlogged</b> (requests unreported for 30 days or longer) as of <b>January 1, 2009</b> ;	b. _____	b. _____	b. _____	b. _____
c. Total number of <b>new requests</b> received in 2009;	c. _____	c. _____	c. _____	c. _____
d. Total number of requests <b>completed</b> in 2009;	d. _____	d. _____	d. _____	d. _____
e. Number of <b>FTEs</b> it took to complete the requests (as reported in item d);	e. _____	e. _____	e. _____	e. _____
f. Total number of all <b>pending requests</b> awaiting analysis as of <b>January 1, 2010</b> ;	f. _____	f. _____	f. _____	f. _____
g. Number of these pending requests that were <b>backlogged</b> (requests unreported for 30 days or longer) as of <b>January 1, 2010</b> ; and	g. _____	g. _____	g. _____	g. _____
h. Current <b>average turnaround time</b> (in days) for requests. (Round to the nearest full day)	h. _____	h. _____	h. _____	h. _____

Discipline Areas:	D16. FORENSIC BIOLOGY	D17. CRIME SCENE
DISCIPLINE NOT APPLICABLE	<input type="checkbox"/> 99	<input type="checkbox"/> 99
a. Total number of all <b>pending requests</b> awaiting analysis as of <b>January 1, 2009</b> ;	a. _____	a. NA
b. Number of these pending requests that were <b>backlogged</b> (requests unreported for 30 days or longer) as of <b>January 1, 2009</b> ;	b. _____	b. NA
c. Total number of <b>new requests</b> received in 2009;	c. _____	c. _____
d. Total number of requests <b>completed</b> in 2009;	d. _____	d. _____
e. Number of <b>FTEs</b> it took to complete the requests (as reported in item d);	e. _____	e. _____
f. Total number of all <b>pending requests</b> awaiting analysis as of <b>January 1, 2010</b> ;	f. _____	f. NA
g. Number of these pending requests that were <b>backlogged</b> (requests unreported for 30 days or longer) as of <b>January 1, 2010</b> ; and	g. _____	g. NA
h. Current <b>average turnaround time</b> (in days) for requests. (Round to the nearest full day)	h. _____	h. _____

In addition to the general discipline areas above, a similar set of questions is asked below regarding three forensic biology sample types.

**D18. SEXUAL ASSAULT EVIDENCE**

Not Applicable 99 → Skip to D19

a. Of the **pending requests** reported above in D16-Forensic Biology that were awaiting analysis as of **January 1, 2009**, how many were for **sexual assault evidence**?

a. \_\_\_\_\_

b. How many of these pending requests for **sexual assault evidence** were **backlogged** (requests held for 30 days or longer) as of **January 1, 2009**?

b. \_\_\_\_\_

c. Of the total number of **new requests** received in 2009 that were reported above in D16-Forensic Biology, how many were for **sexual assault evidence**?

c. \_\_\_\_\_

d. Of the total number of requests **completed** in 2009 that were included in D16-Forensic Biology, how many were for **sexual assault evidence**?

d. \_\_\_\_\_

e. Of the total number of all **pending requests** awaiting analysis as of **January 1, 2010** that were included in D16-Forensic Biology, how many were for **sexual assault evidence**?

f. \_\_\_\_\_

f. How many of these pending requests for **sexual assault evidence** were **backlogged** (requests held for 30 days or longer) as of **January 1, 2010**?

g. \_\_\_\_\_

**D19. CONVICTED OFFENDER**

Not Applicable 99 → Skip to D20

a. Of the **pending requests** reported above in D16-Forensic Biology that were awaiting DNA analysis as of **January 1, 2009**, how many were for **convicted offender samples**?

a. \_\_\_\_\_

b. How many of these pending requests for **convicted offender samples** were **backlogged** (requests held for 30 days or longer) as of **January 1, 2009**?

b. \_\_\_\_\_

c. Of the total number of **new requests** received in 2009 that were reported above in D16-Forensic Biology, how many were for **convicted offender samples**?

c. \_\_\_\_\_

d. Of the total number of requests **completed** in 2009 that were included in D16-Forensic Biology, how many were for **convicted offender samples**?

d. \_\_\_\_\_

e. Of the total number of all **pending requests** awaiting DNA analysis as of **January 1, 2010** that were included in D16-Forensic Biology, how many were for **convicted offender samples**?

f. \_\_\_\_\_

f. How many of these pending requests for **convicted offender samples** were **backlogged** (requests held for 30 days or longer) as of **January 1, 2010**?

g. \_\_\_\_\_

**D20. ARRESTEE**

Not Applicable 99 → Skip to E1

a. Of the **pending requests** reported above in D16-Forensic Biology that were awaiting DNA analysis as of **January 1, 2009**, how many were for **arrestee samples**?

a. \_\_\_\_\_

b. How many of these pending requests for **arrestee samples** were **backlogged** (requests held for 30 days or longer) as of **January 1, 2009**?

b. \_\_\_\_\_

c. Of the total number of **new requests** received in 2009 that were reported above in D16-Forensic Biology, how many were for **arrestee samples**?

c. \_\_\_\_\_

d. Of the total number of requests **completed** in 2009 that were included in D16-Forensic Biology, how many were for **arrestee samples**?

d. \_\_\_\_\_

e. Of the total number of all **pending requests** awaiting DNA analysis as of **January 1, 2010** that were included in D16-Forensic Biology, how many were for **arrestee samples**?

f. \_\_\_\_\_

f. How many of these pending requests for **arrestee samples** were **backlogged** (requests held for 30 days or longer) as of **January 1, 2010**?

g. \_\_\_\_\_

**SECTION E: OUTSOURCING**

E1. Did your laboratory **outsource** the testing of any types of evidence or samples for analysis in 2009?

- 1 Yes
- 2 No → Skip to E4

E2. What was the total amount of your laboratory budget that was spent on **outsourcing** in 2009?

\$ \_\_\_\_\_ .00



E3. For each type, please report the **number of requests** your laboratory **outsourced** in 2009. Please enter a response for every space and indicate N/A or 0, where appropriate.

		Not Applicable
Controlled Substances	a. _____	<input type="checkbox"/> <sub>99</sub>
Toxicology (General)	b. _____	<input type="checkbox"/> <sub>99</sub>
Trace (General)	c. _____	<input type="checkbox"/> <sub>99</sub>
Forensic Biology (General)	d. _____	<input type="checkbox"/> <sub>99</sub>
Offender Samples	e. _____	<input type="checkbox"/> <sub>99</sub>
Arrestee Samples	f. _____	<input type="checkbox"/> <sub>99</sub>
Firearms/Toolmarks	g. _____	<input type="checkbox"/> <sub>99</sub>
Digital & Multimedia Evidence	h. _____	<input type="checkbox"/> <sub>99</sub>
Latent Prints (General)	i. _____	<input type="checkbox"/> <sub>99</sub>
Questioned Documents	j. _____	<input type="checkbox"/> <sub>99</sub>
Impressions (General)	k. _____	<input type="checkbox"/> <sub>99</sub>
Crime Scene (General)	l. _____	<input type="checkbox"/> <sub>99</sub>
Other (please specify below)		<input type="checkbox"/> <sub>99</sub>
Type of Request	# of Requests	
_____	m. _____	
_____	n. _____	
<b>TOTAL (sum a—n)</b>	<b>o. _____</b>	

E4. Did your laboratory **receive requests** from other laboratories rather than directly from law enforcement in 2009?

<sub>1</sub> Yes  
<sub>2</sub> No → Skip to F1

E5. For each type, please report the **number of requests** your laboratory **received** from other laboratories in 2009. Please enter a response for every space and indicate N/A or 0, where appropriate.

		Not Applicable
Controlled Substances	a. _____	<input type="checkbox"/> <sub>99</sub>
Toxicology (General)	b. _____	<input type="checkbox"/> <sub>99</sub>
Trace (General)	c. _____	<input type="checkbox"/> <sub>99</sub>
Forensic Biology (General)	d. _____	<input type="checkbox"/> <sub>99</sub>
Offender Samples	e. _____	<input type="checkbox"/> <sub>99</sub>
Arrestee Samples	f. _____	<input type="checkbox"/> <sub>99</sub>
Firearms/Toolmarks	g. _____	<input type="checkbox"/> <sub>99</sub>
Digital & Multimedia Evidence	h. _____	<input type="checkbox"/> <sub>99</sub>
Latent Prints (General)	i. _____	<input type="checkbox"/> <sub>99</sub>
Questioned Documents	j. _____	<input type="checkbox"/> <sub>99</sub>
Impressions (General)	k. _____	<input type="checkbox"/> <sub>99</sub>
Crime Scene (General)	l. _____	<input type="checkbox"/> <sub>99</sub>
Other (please specify below)		<input type="checkbox"/> <sub>99</sub>
Type of Request	# of Requests	
_____	m. _____	
_____	n. _____	
<b>TOTAL (sum a—n)</b>	<b>o. _____</b>	

## SECTION F: QUALITY ASSURANCE

F1. As of December 31, 2009, was your crime laboratory accredited?

- <sub>1</sub> Yes → Skip to F3  
<sub>2</sub> No

F2. As of December 31, 2009, had your crime laboratory applied for accreditation?

- <sub>1</sub> Yes  
<sub>2</sub> No → Skip to F4

F3. As of December 31, 2009, was your crime laboratory accredited by or in the application process for the following? (check all that apply)

- <sub>1</sub> a. ASCLD/LAB, Legacy  
<sub>2</sub> b. ASCLD/LAB, International (ISO 17025)  
<sub>3</sub> c. FQS-International  
<sub>4</sub> d. Other (please specify below)  
 \_\_\_\_\_

F4. Does your laboratory conduct proficiency testing on its analysts/examiners?

- <sub>1</sub> Yes  
<sub>2</sub> No → Skip to F6

F5. Which of the following proficiency tests does your laboratory perform:

Yes No

- <sub>1</sub> <sub>2</sub> a. **Blind-** analyst/examiner is not told which case is for proficiency testing?  
<sub>1</sub> <sub>2</sub> b. **Declared-** analyst/examiner is told when he/she is being tested?  
<sub>1</sub> <sub>2</sub> c. **Random case reanalysis-** random selection of analyst/examiner's prior case work for reanalysis by another analyst/examiner?  
<sub>1</sub> <sub>2</sub> d. **Other proficiency testing** (please specify below)  
 \_\_\_\_\_

F6. How many examiners/analysts in your laboratory are externally certified by one or more of the certification bodies below? (Only include if certified by entities below)

\_\_\_\_\_ examiners/analysts

List of Selected Certification Entities:

American Board of Criminalistics  
 American Board of Forensic Document Examiners  
 American Board of Forensic Odontology  
 American Board of Forensic Toxicology  
 American Board of Medicolegal Death Investigators  
 American Board of Forensic Anthropology  
 International Association for Identification  
 (not including ten print certification)  
 Forensic Toxicologist Certification Board  
 Association of Firearms and Toolmark Examiners  
 Board of Forensic Document Examiners  
 International Institute of Forensic Engineering Sciences



F7. What are your laboratory's performance expectations, or the expected number of requests processed, for one full-time equivalent (FTE) examiner for one year in the following disciplines? Please enter a response for every space and indicate N/A or 0, where appropriate.

		Not Applicable
Controlled Substances	a. _____	<input type="checkbox"/> 99
Toxicology (General)	b. _____	<input type="checkbox"/> 99
Trace (General)	c. _____	<input type="checkbox"/> 99
Forensic Biology (General)	d. _____	<input type="checkbox"/> 99
Firearms/Toolmarks	e. _____	<input type="checkbox"/> 99
Digital & Multimedia Evidence	f. _____	<input type="checkbox"/> 99
Latent Prints (General)	g. _____	<input type="checkbox"/> 99
Questioned Documents	h. _____	<input type="checkbox"/> 99
Impressions (General)	i. _____	<input type="checkbox"/> 99
Crime Scene (General)	j. _____	<input type="checkbox"/> 99
Other (please specify below)		<input type="checkbox"/> 99
Type of Request	# of Requests	
_____	k. _____	
_____	l. _____	

F8. On average, what percentage of time for one full-time equivalent (FTE) was spent on court testimony, including preparation for court testimony, in 2009? If your laboratory does not have the position, check N/A.

		Not Applicable
a. <u>Analyst/Examiner</u> Entry-level or no experience necessary	_____ %	<input type="checkbox"/> 99
b. <u>Analyst/Examiner</u> Intermediate/Senior-level; with some experience to full journeyman with no supervisory requirement.	_____ %	<input type="checkbox"/> 99
c. <u>Technical Support</u> (e.g., lab technician, lab support personnel, etc.)	_____ %	<input type="checkbox"/> 99

F9. On average, what percentage of time for one full-time equivalent (FTE) was spent attending training in 2009? If your laboratory does not have the position, check N/A.

		Not Applicable
a. <u>Analyst/Examiner</u> Entry-level or no experience necessary	_____ %	<input type="checkbox"/> 99
b. <u>Analyst/Examiner</u> Intermediate/Senior-level; with some experience to full journeyman with no supervisory requirement.	_____ %	<input type="checkbox"/> 99
c. <u>Technical Support</u> (e.g., lab technician, lab support personnel, etc.)	_____ %	<input type="checkbox"/> 99

F10. On average, what percentage of time for one full-time equivalent (FTE) was spent providing training in 2009? If your laboratory does not have the position, check N/A

		Not Applicable
a. <u>Analyst/Examiner</u> Entry-level or no experience necessary	_____ %	<input type="checkbox"/> 99
b. <u>Analyst/Examiner</u> Intermediate/Senior-level; with some experience to full journeyman with no supervisory requirement.	_____ %	<input type="checkbox"/> 99
c. <u>Technical Support</u> (e.g., lab technician, lab support personnel, etc.)	_____ %	<input type="checkbox"/> 99

F11. Research may be experimentation aimed at the discovery and interpretation of facts, the revision of accepted theories, or practical application of such new or revised theories or technologies. Does your laboratory have resources dedicated primarily to research?

- 1 Yes  
2 No

## SECTION G: CURRENT ISSUES

G1. On a scale of 1 to 5, with 1 being a significant increase and 5 being a significant decrease, describe any observed changes in the following demands on laboratory resources during 2009:

	Not Applicable	Significantly Increase	Increase	No Change	Decrease	Significantly Decrease	
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		Demand for analyst/examiner in-person court testimony
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		Demand for analysis of offender DNA samples due to expansion of database eligible offenses
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		Demand for analysis of arrestee DNA samples due to expansion of database eligible offenses
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		Demand for analysis of DNA evidence from non-violent offenses
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5		Demand to condense or eliminate services offered

**SECTION H: FEEDBACK & SUBMISSION**

Please write any other comments you wish to share in the space below.

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**Directions for submission:**

1. Please review your answers, and make sure that no questions are left blank. Select “not applicable” or enter a “0” where applicable.
2. If you have completed this survey electronically, you are finished. There is nothing more to be done.
3. If you completed the paper form, please return your completed survey in the enclosed postage-paid envelope to the Urban Institute, FAX it to us at (202) 659-8985, or email it to [CFCL@urban.org](mailto:CFCL@urban.org).
4. If you have any additional questions, you may contact the research team on the Help Line toll-free at (800) xxx-xxxx between 9AM and 5PM EST.

Thank you for taking the time to complete this important survey.