

Department Annual Progress Report
Active Hiring Grants

This survey pertains to the <TOTAL # FULL-TIME AND # PART-TIME> COPS active officer position(s) awarded under the following grant(s) as of < DATE COPS SETS>.

Grant Program	Grant #	Active Full-Time Position(s)	Active Part-Time Position(s)
COPS Hiring Grant #1	2002SHWX0655	2	0
COPS Hiring Grant #2	2002ULWX0027	15	0
COPS Hiring Grant #3	2005ULWX0001	13	0

COPS FUNDED OFFICER INFORMATION

1) As of <DATE COPS SETS>, how many **active** COPS grant position(s) were **filled**?

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number	0	0
COPS Hiring Grant #2	Grant Number	0	0
COPS Hiring Grant #3	Grant Number	0	0

2) As of <DATE COPS SETS>, how many of the unfilled COPS grant position(s) **do you intend to fill?**

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number	0	0
COPS Hiring Grant #2	Grant Number	0	0
COPS Hiring Grant #3	Grant Number	0	0

3) As of <DATE COPS SETS>, how many of the unfilled grant position(s) are **not going to be filled?**

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number	0	0
COPS Hiring Grant #2	Grant Number	0	0
COPS Hiring Grant #3	Grant Number	0	0

*For the position(s) you do not intend to fill, please contact your Grant Program Specialist at 1-800-421-6770 to discuss a grant modification and/or withdrawal.

4) As of <DATE COPS SETS>, how many of the officers awarded under your xxxx grant have been deployed to xxxx?

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number	0	0
COPS Hiring Grant #2	Grant Number	1	0
COPS Hiring Grant #3	Grant Number	1	0

5) Does your agency intend to retain with State and local funds the additional officer position(s) awarded under the COPS grant(s) for at least one full local budget cycle after the 36-month funding period for each position? **Please mark the appropriate box below to indicate if the position(s) will be retained for each grant. Also, be sure to provide a reason if the position(s) will not be retained.**

*COPS grantees are required to retain the increased number of officer positions awarded with local or state funds for at least one full local fiscal year/budget cycle following the 36-month funding period for each position awarded. This means that the additional officer positions should be added to your agency's law enforcement budget over and above all of the other locally funded positions that would exist regardless of the grant. Absorbing your COPS-funded officer positions through attrition (rather than adding extra positions to your budget with additional funding) will not meet the retention requirement.

COPS Hiring Grant #1

Full Time Positions: **2** Part Time Positions: **0**

The position(s) awarded under this grant **will be** retained as required.

The position(s) awarded under this grant **will not** be retained as required.

How many position(s) awarded under this grant will not be retained? <<Appears if will not retain is checked>>

Full time Positions: _____ **Part Time Positions:** _____

Please mark the reason(s) that the retention requirement will not be met

Need to withdraw from the grant- please explain briefly below

* If you need to withdraw from the grant please contact your Grant Program Specialist at 1-800-421-6770

Severe fiscal distress- please explain briefly below

Other-please briefly explain below

COPS Hiring Grant #2

Full Time Positions: **15** Part Time Positions: **0**

The position(s) awarded under this grant **will be** retained as required.

The position(s) awarded under this grant **will not** be retained as required.

How many position(s) awarded under this grant will not be retained? <<Appears if will not retain is checked>>

Full time Positions: _____ **Part Time Positions:** _____

Please mark the reason(s) that the retention requirement will not be met

Need to withdraw from the grant- please explain briefly below

* If you need to withdraw from the grant please contact your Grant Program Specialist at 1-800-421-6770

Severe fiscal distress- please explain briefly below

Other-please briefly explain below

COPS Hiring Grant #3

Full Time Positions: **13** Part Time Positions: **0**

- The position(s) awarded under this grant **will be** retained as required.
- The position(s) awarded under this grant **will not** be retained as required.

Full time Positions: 0 Part Time Positions: 0

Please mark the reason(s) that the retention requirement will not be met

- Need to withdraw from the grant- please explain briefly below**

* If you need to withdraw from the grant please contact your Grant Program Specialist at 1-800-421-6770

- Severe fiscal distress- please explain briefly below**

- Other-please briefly explain below**

COMMUNITY POLICING ACTIVITIES (ACTIVE GRANTS)

We are now going to ask you some questions regarding your agency's community policing activities.

During the **12-month period ending <DATE COPS SETS>**, have COPS grants enhanced your agency's community policing efforts?

- Yes
- No

During the **12-month period ending <DATE COPS SETS>**, please mark all of the following that apply to your agency.

- Patrol officers regularly engaged in Scanning, Analysis, Response, Assessment (SARA) & SARA-type problem-solving approach projects on their beats.
- Patrol officers held responsibility for specific geographic areas/beats for extended periods of time.
- Used technology to support community policing activities, such as CAD, RMS, laptops in vehicles, etc.
- Community policing philosophy adopted and practiced organization wide.
- Used data-driven decision-making for resource allocation.
- Included community policing skills/elements in recruitment and hiring decisions.
- Regularly provided community policing training (Scanning, Analysis, Response, Assessment (SARA) & SARA-type problem-solving approaches, community partnerships, etc.) to department personnel.
- Included community policing elements in the evaluation criteria of officers.
- Conducted or sponsored a survey of citizens on crime and community problem related topics.
- Regularly met with community groups and/or other local government agencies to address community problems.
- Regularly distributed crime data to the community through websites, press releases, newsletters, public kiosks, etc.
- Regularly provided opportunities for citizens to volunteer in the police department (through formalized Volunteers in Police Service Programs, citizen police academies, or other volunteer opportunities).
- Trained citizens in community policing (e.g. , community mobilization and problem solving).
- Used community policing principles to address homeland security related issues.
- Other-please describe briefly below

SCHOOL RELATED COMMUNITY POLICING ACTIVITIES (ACTIVE GRANTS) <CIS Grantees Only>

During the **12-month period ending <DATE COPS SETS>**, please mark all of the following that apply to your agency.

- Utilized technology to support community policing activities within a school environment (school mapping, laptops, etc.).
- Included community policing skills/elements in recruitment and hiring decisions for school resource/CIS officers.
- Regularly provided community policing training (Scanning, Analysis, Response, Assessment (SARA) & SARA-type problem-solving approaches, community partnerships, etc.) to department personnel engaged in school-based policing.
- Included community policing elements in the evaluation criteria of school-resource/CIS officers.
- Conducted or sponsored a survey of students, parents, and/or teachers on crime and community problem related topics.
- Trained (or engaged) students, parents, and/or teachers in community policing (e.g., problem solving, crime prevention, conflict resolution/mediation, intervention with at-risk youth, parent meetings, mentoring, GREAT, DARE, etc.).
- Other-please describe briefly below

Certification and Contact Information

If you would like to provide any additional comments, please feel free to include them below.

On a scale from 1 to 10, where "1" is "Poor" and "10" is "Excellent" please rate the ease of completing Department Annual Progress Report (DAPR) online. If you completed this form in hard copy or over the phone, please select N/A.

Poor										Excellent	N/A
	1	2	3	4	5	6	7	8	9	10	
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please provide any additional feedback and/or suggestions for improving the ease of completing the DAPR online.

First and Last Name of Person Completing this Report:

Title of Person Completing this Report:

E-mail of Person Completing this Report (if applicable):

Phone Number of Person Completing this Report:

I certify that the information provided on this form is true and accurate to the best of my knowledge and belief. I understand that false statements or claims made in connection with COPS grant awards may result in fines, imprisonment, debarment from participating in Federal grants or contracts, and/or any other remedy available by law to the Federal Government. Please be advised that a hold may be placed on COPS grant awards if it is deemed that the agency is not in compliance with federal civil rights laws and/or is not cooperating with an ongoing federal civil rights investigation.

Please type your name here in place of your signature:

PAPERWORK REDUCTION ACT NOTICE

The public reporting burden for this collection of information is estimated to be up to one hour per response including time for searching existing data sources, gathering the data needed, and completing and reviewing the report. Send comments regarding this burden estimate or any other aspects of the collection of this information, including suggestions for reducing this burden, to the Office of Community Oriented Policing Services, U.S. Department of Justice, 1100 Vermont Avenue, N.W., Washington, D.C. 20530; and to the Public Use Reports Project, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20530.

You are not required to respond to this collection of information unless it displays a valid OMB control number. The OMB control number for this application is 1103-0094 and the expiration date is 03/31/2008.

Department Annual Progress Report**Expired Hiring Grants**(Surveys may also be completed on-line at www.cops.usdoj.gov)

This survey pertains to the <TOTAL # FULL-TIME AND # PART-TIME> COPS **expired** officer position(s) awarded under the following grant(s) as of <DATE COPS SETS>.

ORI :		Progress Report ID#:	
Legal Name:			
Grant Program	Grant #:	Active Full-Time Position(s)	Active Part-Time Position(s)
COPS Hiring Grant #1	95CCWX0176	2 (including all supplement grants)	0
COPS Hiring Grant #2	1999HHWX033	1	0
COPS Hiring Grant #3	2000HHWX0055	1	0
<i>*If this information is incorrect, please contact an Information Specialist at 1-800-659-7379 before completing the report.</i>			

COPS FUNDED OFFICER INFORMATION

1) As of <DATE COPS SETS>, how many **expired** COPS grant positions remain filled?

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number		
COPS Hiring Grant #2	Grant Number		
COPS Hiring Grant #3	Grant Number		

2) How many of the unfilled COPS grant positions **do you intend to fill** (temporarily vacant only)?

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number		
COPS Hiring Grant #2	Grant Number		
COPS Hiring Grant #3	Grant Number		

3) How many of the unfilled grant positions are **NOT** going to be filled/hired again because they are no longer in your budget (permanently eliminated)?

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number		
COPS Hiring Grant #2	Grant Number		
COPS Hiring Grant #3	Grant Number		

4) As of <DATE COPS SETS>, how many of these **expired** grant positions were never filled during the entire grant period?

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number		
COPS Hiring Grant #2	Grant Number		
COPS Hiring Grant #3	Grant Number		

**For the position(s) that you have never filled, please contact your Grant Program Specialist at 1-800-421-6770 to discuss a grant modification and/or withdrawal.*

5) How many of these expired grant positions have been filled for the entire 36-month funding period?

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number		
COPS Hiring Grant #2	Grant Number		
COPS Hiring Grant #3	Grant Number		

6) How many of these expired grant positions have not been filled for the entire 36-month funding period? (if none, enter 0 below and skip to question 9)

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number		
COPS Hiring Grant #2	Grant Number		
COPS Hiring Grant #3	Grant Number		

6a) For those grant positions that have **not** been filled for the entire 36-month funding period, indicate the total number of months that they have been filled.

**For example, an agency has 2 positions that have not been filled for the entire 36-month funding period. 1 of these positions has been filled for 30 months and 1 of these positions has been filled for 35 months. The total number of months that these positions have been filled is 65 months.*

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number		
COPS Hiring Grant #2	Grant Number		
COPS Hiring Grant #3	Grant Number		

6b) For those grant positions that have not been filled for the entire 36-month funding period, how many of these positions are permanently eliminated (never going to be filled)? (if none, enter 0 below and skip to question 9).

Expiration Date: 03/31/2008

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number		
COPS Hiring Grant #2	Grant Number		
COPS Hiring Grant #3	Grant Number		

7) For those grant positions that have not been filled for the entire 36-month funding period and are permanently eliminated (never going to be filled), please indicate here if you are prepared for the COPS Office to closeout the grant and deobligate any unused funds.

If you are not prepared for the COPS office to closeout your grant and deobligate any unused funds, please DO NOT check here and contact your Grant Program Specialist at 1-800-421-6770.

Grant Program	Grant #	Check if Yes
COPS Hiring Grant #1	Grant Number	<input type="checkbox"/>
COPS Hiring Grant #2	Grant Number	<input type="checkbox"/>
COPS Hiring Grant #3	Grant Number	<input type="checkbox"/>

8) How many of the COPS expired grant positions is the agency retaining (or has it retained) with State or local funds for at least one full local budget cycle after the 36-month funding period?*

Grant Program	Grant #	Full-Time	Part-Time
COPS Hiring Grant #1	Grant Number		
COPS Hiring Grant #2	Grant Number		
COPS Hiring Grant #3	Grant Number		

** COPS grantees are required to retain the increased number of officer positions awarded with local or state funds for at least one full local budget cycle following the 36-month funding period for each position awarded. This means that the additional officer positions should be added to your agency's law enforcement budget over and above all of the other locally funded officer positions that would exist regardless of the grant. Absorbing your COPS-funded officer positions through attrition (rather than adding extra positions to your budget with additional funding) will not meet the retention requirement.*

9) Has the agency submitted a final financial status report (form 269a)?

By responding yes, the COPS Office will assume that the agency is finished with the grant and COPS may begin closeout procedures for the expired grant if determined to be otherwise eligible.

Grant Program	Grant #	Yes	No
COPS Hiring Grant #1	Grant Number	<input type="checkbox"/>	<input type="checkbox"/>
COPS Hiring Grant #2	Grant Number	<input type="checkbox"/>	<input type="checkbox"/>
COPS Hiring Grant #3	Grant Number	<input type="checkbox"/>	<input type="checkbox"/>

COMMUNITY POLICING ACTIVITIES (EXPIRED GRANTS)

We are now going to ask you some questions regarding the community policing activities engaged in by your agency.

Expiration Date: 03/31/2008

During the **12-month period ending** <DATE COPS SETS>, have COPS grants enhanced your agency's community policing efforts?

- Yes
- No

During the **12-month period ending** <DATE COPS SETS>, please mark all of the following that apply to your agency.

- Patrol officers regularly engaged in Scanning, Analysis, Response, Assessment (SARA) & SARA-type problem-solving approach projects on their beats.
- Patrol officers held responsibility for specific geographic areas/beats for extended periods of time.
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- Other-please describe briefly below

Expiration Date: 03/31/2008

SCHOOL RELATED COMMUNITY POLICING ACTIVITIES (EXPIRED GRANTS) <CIS Grantees Only>

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Poor										Excellent	N/A
1	2	3	4	5	6	7	8	9	10		
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Please provide any additional feedback and/or suggestions for improving the ease of completing the DAPR

First and Last Name of Person Completing this Report:

Title of Person Completing this Report:

E-mail of Person Completing this Report (if applicable):

Phone Number of Person Completing this Report:

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U.S. Department of Justice, Office of Community Oriented Policing Services (COPS)
1103-0094

OMB Control Number:

expiration date is 03/31/2008.

Expiration Date: 03/31/2008