

2018 CENSUS OF STATE AND LOCAL LAW ENFORCEMENT AGENCIES



U.S. Department of Justice, Bureau of Justice Statistics, and acting as collection agent: RTI International

Please use this form to provide information on behalf of the following agency:

[FILL AGENCY NAME HERE]

If the agency name printed above is incorrect, please call us at **1-800-845-7883**.

Submit this form using one of the following four methods:

- Online: <https://bjslecs.org/2018csllea>
 - Agency ID:
 - Password:
- E-mail: csllea@rti.org
- Fax: 1-866-354-7883 (toll-free)
- Mail: Use the enclosed postage-paid envelope

Important:

If any of the following conditions applied to your agency as of **December 31, 2017**, you do not need to complete the entire questionnaire. Mark [X] the appropriate box below and return the survey using the return instructions in the next column.

☐ Agency no longer in existence
 → Enter date agency ceased operations:

Month	Day	Year			

☐ Agency contracted or outsourced all law enforcement services to the following agency
 → Enter the name of the agency providing contractual services:

- ☐ Agency employed only part-time officers and the total combined hours worked for these officers averaged less than 35 hours per week
- ☐ All the officers in the agency were unpaid volunteers
- ☐ All the officers in the agency were paid via fee-for-service and not salary
- ☐ Agency was private (i.e., not operated with funds from a state, local, special district, or tribal government)
- ☐ Agency was operated by the Federal government

Indicate who completed this form:

Name:
Last Name First Name MI

Title:

Phone:
Area Code Number Extension

Fax:
Area Code Number

E-mail:

Agency Website:

- Please retain a copy of your completed survey. Questionnaires completed online can be printed for your records.
- If you have any questions, call RTI toll-free at **1-800-845-7883**, or send an e-mail to csllea@rti.org. When corresponding about this survey, please refer to the Agency ID number above.
- If you have any general comments or suggestions for improving the survey, please contact Shelley Hyland of the Bureau of Justice Statistics by phone at 1-202-616-1706 or by e-mail at Shelley.Hyland@usdoj.gov

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 **30** minutes 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 (34 USC 10132), 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.

INSTRUCTIONS

- Please do not leave any items blank.
- If the answer to a question is “none” or “zero,” write “0” in the space provided.
- Use an X when marking an answer in a box.

VERIFY CONTACT INFORMATION

The contact information at right is on file for this agency:

[Chief Name]

[Title]

[Agency Address]

Is this information correct?

☐ Yes

☐ No → Provide correct information:

SURVEY QUESTIONS

1. What type of government operates this agency? Mark [X] only one.

☐ State

☐ County or parish

☐ Regional

☐ Municipal (city, town or township)

☐ School district (K-12)

☐ 2-year college

☐ 4-year college or university

☐ Tribal

☐ Special district or authority (Specify):

2. Is your agency primarily responsible for providing law enforcement services within the jurisdiction above?

☐ Yes

☐ No → Specify primary agency:

3. Enter your agency's total operating budget for the fiscal or calendar year that includes **December 31, 2017**. If not available, provide an estimate and mark [X] the estimate checkbox. Include jails administered by your agency. Exclude building construction costs and major equipment purchases.

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If estimate, check here: ☐

4. During 2017, did your agency perform any of these functions on a regular basis or have primary responsibility for performing when needed? Mark [X] Yes or No for each function. Do not leave any blank.

A. Patrol and response functions	Yes	No
1. Routine patrol services	☐	☐
2. Responding to citizen initiated requests for service	☐	☐
3. First response to criminal incidents	☐	☐
4. Arrest of criminal suspects	☐	☐
5. Special events/crowd control	☐	☐
6. Dispatching of calls for service	☐	☐
B. Criminal investigation for:	Yes	No
1. Homicide	☐	☐
2. Cybercrime	☐	☐
3. Arson	☐	☐
C. Traffic and vehicle-related functions	Yes	No
1. Traffic law enforcement	☐	☐
2. Traffic direction and control	☐	☐
3. Accident investigation	☐	☐
4. Parking enforcement and control	☐	☐
5. Commercial vehicle enforcement	☐	☐
D. Detention-related functions	Yes	No
1. Inmate transport	☐	☐
2. Booking and release of inmates	☐	☐
3. Operating a temporary holding cell (not for overnight detention)	☐	☐
4. Operating an <u>overnight</u> lockup or temporary holding facility <u>separate</u> from a jail	☐	☐
5. Operating 1 or more jails	☐	☐
E. Court-related functions	Yes	No
1. Providing court security	☐	☐
2. Serving process (i.e., legal notification)	☐	☐
3. Executing arrest warrants	☐	☐
4. Serving eviction notices	☐	☐
5. Enforcing protection orders	☐	☐
6. Enforcing child support orders	☐	☐
7. Apprehension of fugitives	☐	☐
F. Forensic services	Yes	No
1. Forensic crime scene investigation	☐	☐
2. Processing of digital evidence	☐	☐
3. Operating a forensic crime lab	☐	☐
G. Special public safety functions	Yes	No
1. Animal control	☐	☐
2. School crossing services	☐	☐
3. Emergency medical services	☐	☐
4. Emergency management	☐	☐
5. Fire services	☐	☐
H. Task force participation for:	Yes	No
1. Gangs	☐	☐
2. Drug trafficking	☐	☐
3. Opioid abuse	☐	☐
4. Human trafficking	☐	☐
5. Anti-terrorism	☐	☐
6. Other (<i>Specify</i>):	☐	☐
I. Specialized functions	Yes	No
1. Bomb/explosives disposal	☐	☐
2. Canine/K-9	☐	☐
3. Crime analysis	☐	☐
4. Firearm background checks	☐	☐
5. Search and rescue	☐	☐
6. Tactical operations (SWAT)	☐	☐
7. Underwater recovery	☐	☐
8. Operating a basic training academy	☐	☐
9. Providing direct victim assistance or programs	☐	☐
10. Providing law enforcement services to or on tribal lands	☐	☐
11. Other (<i>Specify</i>):	☐	☐

Please continue to Page 4 →

5. Enter the number of authorized full-time sworn in your agency's budget and the number of actual full-time and part-time paid agency employees during the pay period that included **December 31, 2017**. Count employees who are regularly scheduled to work less than 35 hours per week as part-time. If none, enter 0.

	Authorized Full-Time	Actual Full-Time	Actual Part-Time
a. <i>Fully Sworn</i> : Officers with general arrest powers			
b. <i>Limited Sworn</i> : Officers with limited or no arrest powers			
c. Non-sworn employees	Not Applicable		
d. Total employees (Sum of rows a-c)	Not Applicable		

6. Enter the number of actual full-time sworn officers by sex for the pay period that included **December 31, 2017**. Each total should match the number reported in the same colored cell in Question 5. If none, enter 0.

	Fully Sworn	Limited Sworn
a. Male		
b. Female		
c. Total officers (Sum of rows a and b)		

7. Enter the number of actual full-time sworn officers that performed the following duties as their primary job responsibility for the pay period that included **December 31, 2017**. Count each officer only once. Each total should match the number reported in the same colored cell in Question 5. If none, enter 0.

	Fully Sworn	Limited Sworn
a. Patrol duties (including community policing officers)		
b. Investigative duties (e.g., detectives, investigators)		
c. K-12 school safety duties (e.g., school resource or liaison officer)		
d. Jail-related duties		
e. Court-related duties		
f. Other duties (<i>Specify</i>): 		
g. Total officers (Sum of rows a-f)		

Thank You!

Thank you for participating in this survey. Please retain a copy for your records. If you have any questions about this survey, please contact the CSLLEA team at 1-800-845-7883 or csllea@rti.org.