

2024 Census of Publicly Funded Forensic Crime Laboratories U.S. Department of Justice, Bureau of Justice Statistics



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 1-877-834-7063.

Survey Instructions:

- Submit this form using one of the following three methods:
o Online: www.bjsforensics.org
Agency ID: [ ] Password: [ ]
o E-mail: bjsforensics@rti.org
o Mail: Use the enclosed postage-paid envelope
Please do not leave any items blank.
If the answer to a question is none or zero, write "0" in the space provided.
Use blue or black ink and print as neatly as possible.
Use an "X" when marking an answer in a box.
When a question includes "during 2024" or "in 2024", report for the period of January 1 through December 31, 2024.

Indicate who completed this form. We are only collecting this information to identify a point of contact for questions related to the survey responses. This information will not be shared or published.

Name: [ ] [ ] [ ] Last Name First Name MI
Title: [ ]
Phone: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Area Code Number Extension
E-mail: [ ]
Agency Website: [ ]

If you have any questions, call RTI toll-free at 1-877-834-7063, or send an e-mail to bjsforensics@rti.org. If you have general project-related questions, please contact Matt Durose of BJS at 202-598-0295 or matt.durose@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 90 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, Office of Justice Programs, U.S. Department of Justice, 999 North Capital Street, NE, 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.

BJS is conducting this data collection under Title 34 United States Code, Section 10134. By law, BJS will only use the information for statistical purposes and must protect the confidentiality of information identifiable to a private person. [Title 34 U.S.C. Sections 10134 and 10231]

## Eligibility

As of December 31, 2024, if your laboratory meets the following definition of a publicly funded forensic crime laboratory, you are eligible to complete this survey:

- 1) Your forensic crime laboratory is a government or public agency and
- 2) Your forensic crime laboratory employs one or more full-time analysts whose principal function is the examination of physical or digital evidence in criminal or investigative matters and that provides reports and testimony to courts of law with respect to such evidence.

This definition **excludes** laboratories that engage exclusively in:

- Evidence collection and documentation, such as latent print recovery and development, crime scene response, and photography; or
- Analysis of digital evidence and perform no other forensic functions.

**Select the option that applies to your laboratory:**

- Yes**, my laboratory meets the above definition. **Please complete this survey.**
- No**, my laboratory does not meet the above definition. **You do not need to complete this survey. Please return this survey using the enclosed postage-paid envelope.**
- My laboratory no longer exists as of December 31, 2024. **You do not need to complete this survey. Please return this survey using the enclosed postage-paid envelope.**

## Section A: Organization

**A1. As of December 31, 2024, was your laboratory part of a multi-laboratory system? A multi-laboratory system is defined as two or more separate laboratory entities that are overseen by a single organization.**

- Yes → **Go to A2 and please answer the remainder of the survey questions for your entire multi-laboratory system. If you are unable to do so, please call RTI toll-free at 1-877-834-7063 or send an e-mail to [bjeforensics@rti.org](mailto:bjeforensics@rti.org).**
- No → **SKIP to A3**

→ **A2. As of December 31, 2024, how many distinct laboratories were in your multi-laboratory system? Include your own laboratory in this total.**

laboratories

**A3. What level of government operates your laboratory? Mark one.**

- City, borough, village, or town
- County or parish
- State
- Federal

**A4. Which of the following best describes the agency that has administrative oversight of your laboratory? Administrative oversight is defined as staffing and budgetary oversight. Mark one.**

- Law enforcement entity (e.g., department or division of public safety)
- Department or division of forensic science
- Government attorney's office (e.g., district attorney)
- Public health agency (e.g., department or division of public health, medical examiner office)
- Other (please specify) ↓

**A5. Does your laboratory have oversight from a forensic science board or commission?**

- Yes
- No → **SKIP to A7**

**A6. Does the forensic science board or commission have a regulatory or advisory role? Mark all that apply.**

- Regulatory role
- Advisory role

**A7. As of December 31, 2024, did your laboratory have a Laboratory Information Management System (LIMS)? LIMS is a computerized system used to manage, compile, or track requests and/or evidence. If your laboratory's LIMS is only deployed for certain disciplines, or is being upgraded or installed, please select "Yes."**

- Yes
- No → **SKIP to A9**

**A8. During 2024, did your laboratory use LIMS for any of the following functions? Mark yes or no for each function.**

Function	Yes	No
a. Tracking by item	<input type="radio"/>	<input type="radio"/>
b. Tracking by request	<input type="radio"/>	<input type="radio"/>
c. Tracking by law enforcement case number	<input type="radio"/>	<input type="radio"/>
d. Tracking by laboratory case number	<input type="radio"/>	<input type="radio"/>
e. Tracking by criminal offense (e.g., homicide or robbery)	<input type="radio"/>	<input type="radio"/>
f. Tracking by criminal case status (e.g., open, closed, cleared designation, pending court dates, and/or final disposition)	<input type="radio"/>	<input type="radio"/>
g. Calculating turnaround time by item	<input type="radio"/>	<input type="radio"/>
h. Calculating average turnaround time by section	<input type="radio"/>	<input type="radio"/>
i. Calculating average turnaround time for the overall laboratory	<input type="radio"/>	<input type="radio"/>
j. Interfacing with laboratory instrumentation	<input type="radio"/>	<input type="radio"/>
k. Monitoring backlog	<input type="radio"/>	<input type="radio"/>
l. Documenting chain of custody	<input type="radio"/>	<input type="radio"/>
m. Generating reports (e.g., creating reports, inputting data into report templates)	<input type="radio"/>	<input type="radio"/>
n. Paperless reporting (e.g., entering records directly into a digital device)	<input type="radio"/>	<input type="radio"/>
o. Generating discovery	<input type="radio"/>	<input type="radio"/>

**A9. During 2024, did your laboratory use any of the following databases? Mark yes or no for each database.**

Databases	Yes	No
a. Paint Data Query (PDQ)	<input type="radio"/>	<input type="radio"/>
b. National Integrated Ballistics Information Network (NIBIN)	<input type="radio"/>	<input type="radio"/>
c. Combined DNA Index System (CODIS)	<input type="radio"/>	<input type="radio"/>
d. Automated Fingerprint Identification System (AFIS)	<input type="radio"/>	<input type="radio"/>
e. Next Generation Identification (NGI), formerly Integrated Automated Fingerprint Identification System (IAFIS)	<input type="radio"/>	<input type="radio"/>
f. Ignitable Liquids Reference Collection (ILRC)	<input type="radio"/>	<input type="radio"/>

## Section B: Budget

If your laboratory is part of a multi-laboratory system, please remember to answer for your entire multi-laboratory system.

**B1. On what month, day, and year does your laboratory's 2024 budget year begin and end?**

Start date:   /   /      
M M / D D / Y Y Y Y      End date:   /   /      
M M / D D / Y Y Y Y

**B2. During your laboratory's 2024 budget year, did your laboratory receive funding from any of the following sources? Mark yes or no for each funding source.**

Funding source	Yes	No
a. Asset forfeitures	<input type="radio"/>	<input type="radio"/>
b. Fees for case processing and other services	<input type="radio"/>	<input type="radio"/>
c. Federal grants	<input type="radio"/>	<input type="radio"/>
d. State grants	<input type="radio"/>	<input type="radio"/>
e. City, county, or local grants	<input type="radio"/>	<input type="radio"/>
f. Donations from organizations, families, or individuals	<input type="radio"/>	<input type="radio"/>

**B3. What was the total operating budget for your laboratory's 2024 budget year? If you do not know the total operating budget, please provide your best estimate.**

**Include:**

- Funding received from **all** sources, including any asset forfeitures, fees, grants, donations, or other revenue sources.
- Personnel budgets.
- Outsourcing costs associated with contracting or procuring services from another public, private, commercial, or university laboratory to accomplish laboratory functions.

**Do not include:**

- Funding for building construction or major equipment purchases, defined as nonexpendable items that have a useful life of more than two years and cost more than \$5,000.

\$   ,    ,    .00      Check if estimate:

**B4. What were your laboratory's total expenditures for the following categories during your 2024 budget year? If you do not know your laboratory's expenditures, please provide your best estimate.**

Expenditure category	Expenditures
a. <b>Equipment</b> – total amount spent on nonexpendable items that have a useful life of more than two years and cost more than \$5,000	\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00 Check if estimate: <input type="checkbox"/>
b. <b>Supplies</b> – total amount spent on materials that are expendable, consumed during the course of the year, and cost less than \$5,000	\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00 Check if estimate: <input type="checkbox"/>
c. <b>Outsourcing</b> – total amount spent on outsourcing costs	\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00 Check if estimate: <input type="checkbox"/>
d. <b>Training</b> – total amount spent on training and professional development	\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .00 Check if estimate: <input type="checkbox"/>

## Section C: Staffing

If your laboratory is part of a multi-laboratory system, please remember to answer for your entire multi-laboratory system.

**C1. As of December 31, 2024, how many full-time and part-time employees did your laboratory have?** Include managerial staff, clerical or administrative staff, analysts or examiners (in-training and full-performance), crime scene technicians, evidence technicians, medicolegal death investigators, technical and quality support staff, and any other staff.

Full-time employees (works at least 35 hours/week)

Part-time employees (works less than 35 hours/week)

**C2. As of December 31, 2024, how many full-time employees, part-time employees, and position vacancies did your laboratory have in the following categories?** Report each employee in only one category, based on **primary function**.

Primary function	Full-time (works at least 35 hours/week)	Part-time (works less than 35 hours/week)	Vacancies	My laboratory did not have any staff in this category as of December 31, 2024
a. Managerial staff	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>
b. Clerical or administrative staff	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>
c. Analysts or examiners in-training	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>
d. Analysts or examiners full-performance	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>
e. Crime scene technicians	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>
f. Evidence technicians	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>
g. Medicolegal death investigators	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>
h. Technical and quality support staff (e.g., laboratory technicians, quality specialists)	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>
i. Other staff	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/>

**C3. How many hires and separations of personnel occurred within your laboratory in 2024?**

Hires and separations	Number of full-time personnel	Number of part-time personnel
a. Hires	<input type="text"/> <input type="text"/> <input type="text"/> Check if estimate: <input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> Check if estimate: <input type="checkbox"/>
b. Separations (e.g., voluntary, involuntary, and retirements)	<input type="text"/> <input type="text"/> <input type="text"/> Check if estimate: <input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> Check if estimate: <input type="checkbox"/>

**C4. What are reasons that staff left your laboratory in 2024? Mark all that apply.**

- Voluntary resignations
- Retirements
- Layoffs
- Involuntary separations or dismissals (excluding layoffs)
- Other (please specify) ↴

There were no separations (e.g., voluntary, involuntary, or retirements) during this time.

## Section D: Workload

*If your laboratory is part of a multi-laboratory system, please remember to answer for your entire multi-laboratory system.*

**This section asks about your laboratory's workload and turnaround time. If you have a Laboratory Information Management System (LIMS), please use it to assist with responding to these questions when possible.**

*For the purpose of this survey, please use the following definitions as you answer the questions in this section:*

- **Request** – a submission of physical evidence for analysis to a forensic discipline unit from a single criminal investigation or case. A case may result in more than one request. For example, a case may include requests for toxicology, digital and multimedia evidence, and forensic biology that would be considered three separate requests. Some laboratories refer to a request as a case request, forensic service request, client request, or assignment. A request may contain more than one item of evidence.
- **Outsourced request** – a request sent outside of your laboratory to another public laboratory or to a private, commercial, or university laboratory.
- **Median turnaround time** – median number of days from when the evidence for a request was received by your laboratory to when the report is issued for requests completed during 2024. Only include requests completed within your laboratory and exclude outsourced requests. Round median to the nearest whole day. If evidence or items from a single request were received on different days, please use the day that the first piece of evidence or item was received as the starting point for the median turnaround time.

**D1. Is your laboratory able to calculate median turnaround time using the above definition?**

- Yes → **SKIP to D5 on page 7**
- No

**D2. When your laboratory calculates median turnaround time, does your laboratory use the starting point as defined above? Starting point is defined as the day the first piece of evidence or item from a request was received by your laboratory.**

- Yes
- No (please specify) ↴

**D3. When your laboratory calculates median turnaround time, does your laboratory use the end point as defined above? End point is defined as the day the report was issued for a completed request.**

- Yes
- No (please specify) ↴

**D4. When your laboratory calculates median turnaround time, does your laboratory exclude outsourced requests?**

- Yes
- No

**D5. During 2024, did your laboratory perform forensic functions with controlled substances (e.g., seized drugs)?**

- Yes
- No → **SKIP to D8**

**D6. Please provide the following counts for your laboratory's work with controlled substances.**

*Do not include outsourced requests in your counts or in your median turnaround time.*

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"> </input>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"> </input>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"> </input>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"/> Check if unable to calculate using the provided definition: <input type="checkbox"/>

**D7. During 2024, how many requests for controlled substances (e.g., seized drugs) were outsourced by your laboratory?**

,  outsourced requests  
 Check if estimate:

**D8. During 2024, did your laboratory perform forensic functions with toxicology?**

This includes:

- Antemortem BAC analysis
- Antemortem drug analysis
- Postmortem analysis

- Yes
- No → **SKIP to D12 on page 8**

**D9. What specific functions with toxicology did your laboratory perform?**

*Mark yes or no for each function.*

Function	Yes	No
a. Antemortem BAC analysis	<input type="radio"/>	<input type="radio"/>
b. Antemortem drug analysis	<input type="radio"/>	<input type="radio"/>
c. Postmortem analysis	<input type="radio"/>	<input type="radio"/>

**D10. Please provide the following counts for your laboratory's work with toxicology. Do not include outsourced requests in your counts or in your median turnaround time.**

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"/>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"/>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"/>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"/> Check if unable to calculate using the provided definition: <input type="checkbox"/>

**D11. During 2024, how many requests for toxicology were outsourced by your laboratory?**

,  outsourced requests  
Check if estimate:

**D12. During 2024, did your laboratory perform forensic functions with trace analysis?**

This includes:

- Chemical unknown analysis
- Explosives analysis
- Fiber examination
- Fire debris analysis
- Gunshot residue testing
- Hair examination
- Paint analysis
- Glass analysis
- Physical match/fracture match

Yes

No → **SKIP to D16 on page 9**

**D13. What specific functions with trace analysis did your laboratory perform?**

Mark yes or no for each function.

Function	Yes	No
a. Chemical unknown analysis	<input type="radio"/>	<input type="radio"/>
b. Explosives analysis	<input type="radio"/>	<input type="radio"/>
c. Fiber examination	<input type="radio"/>	<input type="radio"/>
d. Fire debris analysis	<input type="radio"/>	<input type="radio"/>
e. Gunshot residue testing	<input type="radio"/>	<input type="radio"/>
f. Hair examination	<input type="radio"/>	<input type="radio"/>
g. Paint analysis	<input type="radio"/>	<input type="radio"/>
h. Glass analysis	<input type="radio"/>	<input type="radio"/>
i. Physical match/fracture match	<input type="radio"/>	<input type="radio"/>
j. Other trace analysis (if yes, please specify) ↴ <input type="text"/>	<input type="radio"/>	<input type="radio"/>



**D14. Please provide the following counts for your laboratory's work with trace analysis.** Do not include outsourced requests in your counts or in your median turnaround time.

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"/>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"/>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"/>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"/> Check if unable to calculate using the provided definition: <input type="checkbox"/>

**D15. During 2024, how many requests for trace analysis were outsourced by your laboratory?**

,  outsourced requests  
Check if estimate:

**D16. During 2024, did your laboratory perform forensic functions with impressions?**

This includes:

- Footwear examination
- Tire tread examination

Yes

No → **SKIP to D20 on page 10**

**D17. What specific functions with impressions did your laboratory perform? Mark yes or no for each function.**

Function	Yes	No
a. Footwear examination	<input type="radio"/>	<input type="radio"/>
b. Tire tread examination	<input type="radio"/>	<input type="radio"/>

**D18. Please provide the following counts for your laboratory's work with impressions.** Do not include outsourced requests in your counts or in your median turnaround time.

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"/>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"/>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"/>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"/> Check if unable to calculate using the provided definition: <input type="checkbox"/>

**D19. During 2024, how many requests for impressions were outsourced by your laboratory?**

,  outsourced requests

Check if estimate:

**D20. During 2024, did your laboratory perform forensic functions with firearms, toolmarks, or ammunition?**

Yes

No → **SKIP to D24**

**D21. What specific functions with firearms, toolmarks, or ammunition did your laboratory perform? Mark yes or no for each function.**

Function	Yes	No
a. Toolmarks	<input type="radio"/>	<input type="radio"/>
b. Firearms	<input type="radio"/>	<input type="radio"/>
c. Ammunition	<input type="radio"/>	<input type="radio"/>

**D22. Please provide the following counts for your laboratory's work with firearms, toolmarks, or ammunition. Do not include outsourced requests in your counts or in your median turnaround time.**

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"/>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"/>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"/>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"/> Check if unable to calculate using the provided definition: <input type="checkbox"/>

**D23. During 2024, how many requests for firearms, toolmarks, or ammunition were outsourced by your laboratory?**

,  outsourced requests

Check if estimate:

**D24. During 2024, did your laboratory perform forensic functions with digital and multimedia evidence?**

This includes:

- Traditional cellphone (not smartphone) analysis
- Smartphone, tablet, or mobile device analysis
- Laptop or desktop computer analysis
- Thumb and external drives, CDs, DVDs, or other storage media analysis
- GPS and navigation systems analysis
- Audio files analysis
- Video analysis (e.g., CCTV, DVR)
- Vehicle forensics
- Cloud and server data (including social media) analysis

Yes → **Continue to D25 on page 11**

No → **SKIP to D28 on page 11**

**D25. What specific functions with digital and multimedia evidence did your laboratory perform?**

Mark yes or no for each function.

Function	Yes	No
a. Traditional cellphone (not smartphone) analysis	<input type="radio"/>	<input type="radio"/>
b. Smartphone, tablet, or mobile device analysis	<input type="radio"/>	<input type="radio"/>
c. Laptop or desktop computer analysis	<input type="radio"/>	<input type="radio"/>
d. Thumb and external drives, CDs, DVDs, or other storage media analysis	<input type="radio"/>	<input type="radio"/>
e. GPS and navigation systems analysis	<input type="radio"/>	<input type="radio"/>
f. Audio files analysis	<input type="radio"/>	<input type="radio"/>
g. Video analysis (e.g., CCTV, DVR)	<input type="radio"/>	<input type="radio"/>
h. Vehicle forensics	<input type="radio"/>	<input type="radio"/>
i. Cloud and server data (including social media) analysis	<input type="radio"/>	<input type="radio"/>
j. Other analyses of digital and multimedia evidence (if yes, please specify) <input type="text"/>	<input type="radio"/>	<input type="radio"/>

**D26. Please provide the following counts for your laboratory's work with digital and multimedia evidence. Do not include outsourced requests in your counts or in your median turnaround time.**

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"/>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"/>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"/>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"> Check if unable to calculate using the provided definition: <input type="checkbox"/></input>

**D27. During 2024, how many requests for digital and multimedia evidence were outsourced by your laboratory?**

,  outsourced requests

Check if estimate:

**D28. During 2024, did your laboratory perform forensic functions with latent prints?**

This includes:

- Latent print development
- Comparisons analysis

Yes

No → **SKIP to D32 on page 12**

**D29. What specific functions with latent prints did your laboratory perform?**

Mark yes or no for each function.

Function	Yes	No
a. Latent print development	<input type="radio"/>	<input type="radio"/>
b. Comparisons analysis	<input type="radio"/>	<input type="radio"/>

**D30. Please provide the following counts for your laboratory's work with latent prints.** Do not include outsourced requests in your counts or in your median turnaround time.

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"/>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"/>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"/>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"/> Check if unable to calculate using the provided definition: <input type="checkbox"/>

**D31. During 2024, how many requests for latent prints were outsourced by your laboratory?**

,  outsourced requests  
Check if estimate:

**D32. During 2024, did your laboratory perform forensic functions with questioned documents?**

This includes:

- Handwriting analysis
- Ink and paper analysis

Yes

No → **SKIP to D36 on page 13**

**D33. What specific functions with questioned documents did your laboratory perform?**

Mark yes or no for each function.

Function	Yes	No
a. Handwriting analysis	<input type="radio"/>	<input type="radio"/>
b. Ink and paper analysis	<input type="radio"/>	<input type="radio"/>

**D34. Please provide the following counts for your laboratory's work with questioned documents.**

Do not include outsourced requests in your counts or in your median turnaround time.

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"/>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"/>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"/>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"/> Check if unable to calculate using the provided definition: <input type="checkbox"/>

**D35. During 2024, how many requests for questioned documents were outsourced by your laboratory?**

,  outsourced requests

Check if estimate:

**D36. During 2024, did your laboratory perform forensic functions with crime scene investigation?**

This includes:

- Evidence collection
- Reconstruction (e.g., bloodstain pattern analysis, scene)
- Photography

Yes

No → **SKIP to D40**

**D37. What specific functions with crime scene investigation did your laboratory perform?**

Mark yes or no for each function.

Function	Yes	No
a. Evidence collection	<input type="radio"/>	<input type="radio"/>
b. Reconstruction (e.g., bloodstain pattern analysis, scene)	<input type="radio"/>	<input type="radio"/>
c. Photography	<input type="radio"/>	<input type="radio"/>

**D38. Please provide the following counts for your laboratory's work with crime scene investigation.**

Do not include outsourced requests in your counts or in your median turnaround time.

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"/>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"/>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"/>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"/> Check if unable to calculate using the provided definition: <input type="checkbox"/>

**D39. During 2024, how many requests for crime scene investigation were outsourced by your laboratory?**

,  outsourced requests

Check if estimate:

**D40. During 2024, did your laboratory perform forensic functions with forensic biology?**

This includes:

- Casework analysis (e.g., sexual assault casework, biological fluid identification, DNA testing)
- DNA databasing (e.g., convicted offender, arrestee, or other DNA samples)

Yes → **Continue to D41 on page 14**

No → **SKIP to D50 on page 15**

**D41. Did your laboratory perform casework analysis (e.g., sexual assault casework, biological fluid identification, DNA testing)?**

Yes

No → **SKIP to D46 on page 15**

**D42. Please provide the following counts for your laboratory's work with casework analysis. Do not include outsourced requests in your counts or in your median turnaround time.**

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"/>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"/>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"/>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"/> Check if unable to calculate using the provided definition: <input type="checkbox"/>

**D43. During 2024, how many requests for casework analysis were outsourced by your laboratory?**

, outsourced requests

Check if estimate:

**D44. Please provide the following counts only for your laboratory's work with sexual assault casework analysis. Do not include outsourced requests in your counts or in your median turnaround time.**

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"/>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"/>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"/>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"/> Check if unable to calculate using the provided definition: <input type="checkbox"/>

**D45. During 2024, what was the total number of requests for sexual assault casework analysis outsourced by your laboratory?**

, outsourced requests

Check if estimate:

**D46. Did your laboratory perform DNA databasing?**

- Yes
- No → **SKIP to D50**

**D47. What specific functions with DNA databasing did your laboratory perform? Mark yes or no for each function.**

Function	Yes	No
a. Convicted offender DNA samples	<input type="radio"/>	<input type="radio"/>
b. Arrestee DNA samples	<input type="radio"/>	<input type="radio"/>
c. Other DNA samples (e.g., missing persons, paternity)	<input type="radio"/>	<input type="radio"/>

**D48. Please provide the following counts for your laboratory's work with DNA databasing. Do not include outsourced requests in your counts or in your median turnaround time.**

a. Total number of <u>new requests submitted</u> to your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> new requests Check if estimate: <input type="checkbox"/>
b. Total number of <u>requests completed</u> by your laboratory in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> requests completed Check if estimate: <input type="checkbox"/>
c. Total number of <u>pending requests</u> that were unreported for 30 days or longer as of January 1, 2025	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> pending requests Check if estimate: <input type="checkbox"/>
d. <u>Median turnaround time</u> for requests completed in 2024	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> days Check if estimate: <input type="checkbox"/> Check if unable to calculate using the provided definition: <input type="checkbox"/>

**D49. During 2024, how many requests for DNA databasing were outsourced by your laboratory?**

,  outsourced requests  
Check if estimate:

**D50. During 2024, did your laboratory perform other forensic functions not already captured in D5-D40?**

- Yes
- No → **SKIP to D52 on page 16**

**D51. If yes, what other forensic functions did your laboratory perform?**

**D52. During 2024, did your laboratory have a turnaround time mandated by law for any of the forensic functions it performed?**

- Yes  
 No → **SKIP to D54**

**D53. For which of the following functions did your laboratory have a turnaround time mandated by law in 2024? Mark yes or no for each function.**

Function with mandatory turnaround time	Yes	No
a. Controlled substances	<input type="radio"/>	<input type="radio"/>
b. Toxicology	<input type="radio"/>	<input type="radio"/>
c. Antemortem BAC analysis	<input type="radio"/>	<input type="radio"/>
d. Antemortem drug analysis	<input type="radio"/>	<input type="radio"/>
e. Postmortem analysis	<input type="radio"/>	<input type="radio"/>
f. Trace analysis	<input type="radio"/>	<input type="radio"/>
g. Impressions	<input type="radio"/>	<input type="radio"/>
h. Firearms, toolmarks, or ammunition	<input type="radio"/>	<input type="radio"/>
i. Digital and multimedia evidence	<input type="radio"/>	<input type="radio"/>
j. Latent prints	<input type="radio"/>	<input type="radio"/>
k. Questioned documents	<input type="radio"/>	<input type="radio"/>
l. Crime scene investigation	<input type="radio"/>	<input type="radio"/>
m. Forensic biology	<input type="radio"/>	<input type="radio"/>
n. Casework analysis	<input type="radio"/>	<input type="radio"/>
o. Sexual assault casework analysis	<input type="radio"/>	<input type="radio"/>
p. DNA databasing	<input type="radio"/>	<input type="radio"/>

**D54. During 2024, did your laboratory send outsourced requests to any of the following laboratory types? Mark yes or no for each laboratory type.**

Laboratory type	Yes	No
a. Commercial or private laboratory	<input type="radio"/>	<input type="radio"/>
b. Publicly funded laboratory	<input type="radio"/>	<input type="radio"/>
c. University laboratory (public or private)	<input type="radio"/>	<input type="radio"/>

**D55. Which of the following were reasons your laboratory outsourced requests in 2024? Mark yes or no for each reason.**

Outsourced request reasons	Yes	No
a. Did not outsource requests in 2024	<input type="radio"/>	<input type="radio"/>
b. Did not have enough staff to do the work in-house	<input type="radio"/>	<input type="radio"/>
c. Did not have enough funding to do the work in-house	<input type="radio"/>	<input type="radio"/>
d. Access to specialized experience was needed	<input type="radio"/>	<input type="radio"/>
e. Was not accredited to do the work in-house	<input type="radio"/>	<input type="radio"/>
f. Received additional funding for outsourcing	<input type="radio"/>	<input type="radio"/>
g. Did not have a validated method to do the work in-house	<input type="radio"/>	<input type="radio"/>
h. Other (if yes, please specify) ↓	<input type="radio"/>	<input type="radio"/>
<input type="text"/>		



## Section E: Quality Assurance

*If your laboratory is part of a multi-laboratory system, please remember to answer for your entire multi-laboratory system.*

**E1. As of December 31, 2024, was your laboratory required to be accredited by any local, state, or federal jurisdictions that you serve?**

- Yes  
 No

**E2. As of December 31, 2024, were any disciplines in your laboratory accredited? Mark one.**

- Yes, all disciplines in my laboratory were accredited  
 Yes, some disciplines in my laboratory were accredited  
 No, none of the disciplines in my laboratory were accredited

**E3. During 2024, did your laboratory have resources dedicated primarily to research? Research is experimentation aimed at the discovery and interpretation of facts, the revision of accepted methods, or practical application of such new or revised methods or technologies. Resources may include dollars, work-hours, supplies, or other funding dedicated specifically to supporting research.**

- Yes  
 No

**E4. During 2024, did your laboratory conduct proficiency testing?**

- Yes  
 No → **SKIP to E6**


**E5. During 2024, which of the following proficiency tests did your laboratory perform internally or externally? Mark yes or no for each test.**

Proficiency test	Yes	No
a. Blind: analyst/examiner is not told which case is for testing	<input type="radio"/>	<input type="radio"/>
b. Declared: analyst/examiner is told when they are being tested	<input type="radio"/>	<input type="radio"/>
c. Random case reanalysis: random selection of analyst/examiner's prior casework for reanalysis by another analyst/examiner	<input type="radio"/>	<input type="radio"/>
d. Round robin/challenge testing	<input type="radio"/>	<input type="radio"/>
e. Documented performance observation	<input type="radio"/>	<input type="radio"/>

**E6. In 2024, at what level did your laboratory perform technical reviews? A technical review refers to a qualified second party's evaluation of reports, notes, data, and other documentation to ensure there is appropriate and sufficient support for resulting actions, results, conclusions, opinions, and interpretations. Include technical reviews that are completed internally and technical reviews that are outsourced. If your laboratory's technical reviews are discipline-specific, please consider the average percent of technical reviews performed across disciplines. Mark one.**

- Technical reviews were performed on **none (0%)** of the forensic requests completed.  
 Technical reviews were performed on **some (less than 50%)** of the forensic requests completed.  
 Technical reviews were performed on **most (more than 50%)** of the forensic requests completed.  
 Technical reviews were performed on **all (100%)** of the forensic requests completed.

**E7. As of December 31, 2024, did staff in your laboratory have access to any of the following safety and wellness resources?** *If yes, indicate if your laboratory primarily provided these resources directly or through an external agency. Mark yes, directly; yes, through an external agency; or no, staff did not have access to this resource.*

Safety and wellness resource	Yes, directly	Yes, through an external agency	No, staff did not have access to this resource
a. Employee assistance programs (e.g., emotional, stress, legal, or financial support)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Mental health debriefs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Proactive or preventative resiliency programs (e.g., programs for stress or trauma)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Childcare programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Physical fitness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Resources for parents or expecting parents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Peer support programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Other resources (if yes, please specify) 	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Section F: Emerging Topics

*If your laboratory is part of a multi-laboratory system, please remember to answer for your entire multi-laboratory system.*

**F1. In 2024, did multiple analysts or examiners, within the same discipline, perform work on the same evidence in your laboratory, regardless of whether they issued a report?** *This question pertains exclusively to the evidence analysis workflow, from initial examination to final report, and whether multiple analysts performed work on the same evidence. It excludes re-analysis by a separate analyst for proficiency testing or quality assurance.*

- Yes
- No

**F2. In 2024, did your laboratory perform any of the following procedures or use any of the following technologies in-house? Mark yes or no for each procedure or technology.**

Procedure or technology	Yes	No
<b>Forensic biology</b>		
a. Y-STR analysis	<input type="radio"/>	<input type="radio"/>
b. Mitochondrial DNA analysis	<input type="radio"/>	<input type="radio"/>
c. Expert systems, or software to process data without human intervention	<input type="radio"/>	<input type="radio"/>
d. Rapid DNA	<input type="radio"/>	<input type="radio"/>
e. Familial DNA database searches	<input type="radio"/>	<input type="radio"/>
f. Forensic genealogy database searches	<input type="radio"/>	<input type="radio"/>
g. Forensic genealogy testing	<input type="radio"/>	<input type="radio"/>
h. Proteomics	<input type="radio"/>	<input type="radio"/>
i. Kinship	<input type="radio"/>	<input type="radio"/>
j. Robotics	<input type="radio"/>	<input type="radio"/>
<b>Other procedures and technology</b>		
k. 3D firearms imaging instrumentation	<input type="radio"/>	<input type="radio"/>
l. Cell source identification by pathology or instrumental method	<input type="radio"/>	<input type="radio"/>
m. LC-MS/MS for toxicology	<input type="radio"/>	<input type="radio"/>
n. High resolution mass spectrometry (e.g., QTOF)	<input type="radio"/>	<input type="radio"/>
o. Breath alcohol calibration	<input type="radio"/>	<input type="radio"/>
p. Provide materials for canine training aids to law enforcement (e.g., for drugs and explosives detection)	<input type="radio"/>	<input type="radio"/>

**F3. For those technologies your laboratory is not already utilizing, in 2024, was your laboratory in the process of implementing or considering implementing any of the following in-house? Mark yes, no, or already performing in-house for each technology.**

Technology	Yes	No	Already performing in-house
a. Mitochondrial DNA analysis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Expert systems, or software to process data without human intervention	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. LC-MS/MS for toxicology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Rapid DNA	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. 3D firearms imaging instrumentation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. High resolution mass spectrometry (e.g., QTOF)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Other (if yes, please specify) ▼ <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**F4. Please mark the two areas where your laboratory currently has the greatest need for additional funding. Mark two.**

- Personnel
- Equipment
- Supplies
- Training/professional development
- Facilities/infrastructure
- Research & development
- Outsourcing
- Other (please specify) ▼

**F5. Which of the following challenges, if any, did your laboratory face in 2024?**

*Mark yes or no for each challenge.*

<b>Challenges</b>	<b>Yes</b>	<b>No</b>
a. Recruiting staff	<input type="radio"/>	<input type="radio"/>
b. High staff turnover	<input type="radio"/>	<input type="radio"/>
c. Lack of resources or financial support	<input type="radio"/>	<input type="radio"/>
d. Adapting to new or changing laws, policies, or regulations	<input type="radio"/>	<input type="radio"/>
e. Other (if yes, please specify) ↓ <input type="text"/>	<input type="radio"/>	<input type="radio"/>

→ If your laboratory did not face any challenges in 2024, SKIP to F7

**F6. Please select the main challenge your laboratory faced in 2024. Mark one.**

- Recruiting staff
- High staff turnover
- Lack of resources or financial support
- Adapting to new or changing laws, policies, or regulations
- Other (please specify) ↓

**F7. Please write any comments you would like to share with the Bureau of Justice Statistics about:**

- your survey responses
- the survey content or format
- the manner of administration of the survey, or
- any other applicable information.

**Thank you for your participation in the  
2024 Census of Publicly Funded Forensic Crime Laboratories.**

**Your feedback is very important to us!**

**Please return your survey in the enclosed envelope or send to:**

**Census of Publicly Funded Forensic Crime Laboratories**

**RTI International**

**ATTN: 0219263.000.005**

**3040 E. Cornwallis Road, PO Box 12194**

**Research Triangle Park, NC 27709-2194**