

**POLICE DEPARTMENT, COUNTY OF NASSAU, N. Y.
FIELD INTERVIEW WORKSHEET**

FIELD INTERVIEW NO.

CORE DATA				
MEMBER (Serial No.)	DATE	TIME	FIELD INTERVIEW LOCATION	COMMUNITY
				SECTOR

VEHICLE				
PLATE NO.	STATE	YEAR EXPIRES	TYPE	VEHICLE YEAR
MAKE		MODEL		
STYLE	COLOR	VIN. NO.		

NAME 1									
NAME (Last, First, Mi.)						OPERATORS LICENSE NO.		STATE	
ADDRESS				COMMUNITY			STATE	ZIP CODE	
HOME PHONE NO.		OCCUPATION		BORN WHERE		D.O.B.		SOCIAL SECURITY NO.	
SEX <input type="checkbox"/> M. <input type="checkbox"/> F.	RACE	ETHNICITY	HEIGHT	WEIGHT	BUILD	EYE COLOR	HAIR COLOR	ALIEN REGISTRATION NO.	PROBATION/PAROLE <input type="checkbox"/> U <input type="checkbox"/> N <input type="checkbox"/> PR <input type="checkbox"/> PA
GANG AFFILIATION		GANG ID HOW		GANG ID BY	SCARS, MARKS, TATTOOS				
CLOTHING/ATTIRE						ALIAS/NICKNAMES			

NARRATIVE									
WHAT WERE THE CIRCUMSTANCES THAT LED TO THE STOP? (CHECK ALL THAT APPLY)									
<input type="checkbox"/> REPORT FROM A VICTIM/WITNESS		<input type="checkbox"/> AREA HAS A HIGH INCIDENCE OF REPORTED OFFENSE OF TYPE UNDER INVESTIGATION							
<input type="checkbox"/> TIME OF DAY, DAY OF WEEK, SEASON CORRESPONDING TO REPORTS OF CRIMINAL ACTIVITY				<input type="checkbox"/> PROXIMITY TO CRIME LOCATION					
<input type="checkbox"/> SIGHT AND SOUND OF CRIMINAL ACTIVITY			<input type="checkbox"/> ONGOING INVESTIGATION			<input type="checkbox"/> FITS A DESCRIPTION			
<input type="checkbox"/> CARRYING OBJECTS IN PLAIN VIEW USED IN THE COMMISSION OF CRIME					<input type="checkbox"/> WEARING CLOTHS/DISGUISES COMMONLY USED IN THE COMMISSION OF CRIME				
<input type="checkbox"/> SUSPICIOUS BULGE/OBJECT		<input type="checkbox"/> SUSPECT ASSOCIATING WITH PERSONS KNOWN FOR THEIR CRIMINAL ACTIVITY							
<input type="checkbox"/> CHANGING DIRECTION AT SIGHT OF POLICE OFFICER/FLIGHT				<input type="checkbox"/> ACTIONS INDICATIVE OF ENGAGING IN VIOLENT CRIMES					
<input type="checkbox"/> ACTIONS INDICATIVE OF ENGAGING IN DRUG TRANSACTION				<input type="checkbox"/> ACTIONS INDICATIVE OF CASING VICTIM/LOCATION					
<input type="checkbox"/> FURTIVE MOVEMENTS		<input type="checkbox"/> ACTIONS INDICATIVE OF ACTING AS A LOOKOUT			<input type="checkbox"/> OTHER REASONABLE SUSPICION OF CRIMINAL ACTIVITY				
PERIOD OF OBSERVATION PRIOR TO STOP	DURATION OF STOP	<input type="checkbox"/> UNIFORM	IF PLAIN CLOTHES, HOW IDENTIFIED		<input type="checkbox"/> SHIELD	<input type="checkbox"/> ID CARD	DID OFFICER EXPLAIN REASON FOR STOP? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, EXPLAIN		
WAS PHYSICAL FORCE USED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, CHECK ALL THAT APPLY		<input type="checkbox"/> HANDS ON SUSPECT		<input type="checkbox"/> SUSPECT AGAINST WALL/CAR		<input type="checkbox"/> SUSPECT ON GROUND		
WAS A PAT DOWN CONDUCTED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, CHECK ALL THAT APPLY		<input type="checkbox"/> OC SPRAY		<input type="checkbox"/> BATON	<input type="checkbox"/> DRAWING FIREARM	<input type="checkbox"/> POINTING FIREARM AT SUSPECT		<input type="checkbox"/> OTHER
IF YES, CHECK ALL THAT APPLY									
<input type="checkbox"/> VERBAL THREATS OF VIOLENCE BY SUSPECT		<input type="checkbox"/> KNOWLEDGE OF SUSPECTS PRIOR CRIMINAL VIOLENT BEHAVIOR/USE OF FORCE/USE OF WEAPON			<input type="checkbox"/> SUSPICIOUS BULGE/OBJECT				
<input type="checkbox"/> FURTIVE MOVEMENTS		<input type="checkbox"/> ACTIONS INDICATIVE OF ENGAGING IN VIOLENT CRIMES			<input type="checkbox"/> VIOLENT CRIME SUSPECTED				
<input type="checkbox"/> REFUSAL TO COMPLY WITH OFFICER'S DIRECTIONS LEADING TO REASONABLE FEAR FOR SAFETY				<input type="checkbox"/> OTHER REASONABLE SUSPICION OF A WEAPON					

COMMENTS									

NAME 2									
NAME (Last, First, Mi.)						OPERATORS LICENSE NO.		STATE	
ADDRESS				COMMUNITY			STATE	ZIP CODE	
HOME PHONE NO.		OCCUPATION		BORN WHERE		D.O.B.		SOCIAL SECURITY NO.	
SEX <input type="checkbox"/> M. <input type="checkbox"/> F.	RACE	ETHNICITY	HEIGHT	WEIGHT	BUILD	EYE COLOR	HAIR COLOR	ALIEN REGISTRATION NO.	PROBATION/PAROLE <input type="checkbox"/> U <input type="checkbox"/> N <input type="checkbox"/> PR <input type="checkbox"/> PA
GANG AFFILIATION		GANG ID HOW		GANG ID BY	SCARS, MARKS, TATTOOS				
CLOTHING/ATTIRE						ALIAS/NICKNAMES			

GANG DEFINITION

A gang is a group of people who are bound together and form an allegiance for a common purpose and engage in acts injurious to public health and public morals; who pervert or obstruct justice of the due administration of laws or engage in (or have engaged in) criminal activity, either individually within the community. Most gang members are bound together by race, culture, sex or location.

GANG ASSOCIATE

When there are strong indications that an individual has a close relationship with a gang but does not fit the above criteria, he shall be identified as a "Gang Associate".

GANG IDENTIFICATION CODES

1. Self admission of gang membership.
2. Tattoos depicting gang affiliations.
3. Style of dress consistent with gang membership.
4. Possession of gang graffiti on personal property or clothing.
5. Use of hand signs or symbols associated with gangs.
6. Reliable informant identifies person as a gang member.
7. Associates with known gang members.
8. Prior arrests with known gang members: Crimes consistent with usual gang activity.
9. Statements from family members indicating gang membership.
10. Other law enforcement agencies identifying the subject as a gang member.
11. Attendance at gang functions or known gang hang outs.
12. Identified by other gang members or rival gang members.