

DEER PARK POLICE DEPARTMENT

“ARE YOU OK”

Officer Name: _____

Sector: _____

Citizen Contact: _____

Date: _____

Address: _____

Phone: _____

On a scale of 1 to 5, with “1” being “Strongly Disagree” and “5” being “Strongly Agree,” please mark the most appropriate numeric response.

► I feel that I would benefit from the “Are You OK” program.

1 2 3 4 5

► I would like to participate in this program.

1 2 3 4 5

► Other household members living with citizen:

► Special needs (medical) or request:

► Any emergency contact numbers on file with the police department? (If not, list.)

► Any friends that live within the city that you feel may need to be contacted?

Address: _____

Phone number(s): _____

► **Citizen's concerns, comments or suggestions:**

Contact Attempts: Officer: Date Time:

Officer: Date Time:

Officer: Date Time:

Officer Comments:
