



HANOVER PARK POLICE DEPARTMENT CEW DEPLOYMENT FORM



CEW #: _____

Report #: _____ Incident Type: _____ Date: _____ Time: _____

Location of Deployment: _____

Reporting Officer: _____ Witness Officer: _____

Deploying Officer(s) #1: _____ #2: _____

Method of Deployment: (circle) Displayed Painted ARC Probe Stun Probe and Stun Unintentional Discharge

Range of Deployment: _____

Darts Removed by: _____

Animal Use: Y / N If Yes, what type animal: _____ In-Car / Station Video: Yes No

Number of Cycles: (circle) One Two Three # _____

SUSPECT INFORMATION

Suspect Name: _____

Sex: _____ DOB: _____ AGE: _____ HGT: _____ WGT: _____

Suspect's actions prior to deployment:

Did Darts Penetrate Skin? (circle) Yes No One Both

Did a Probe Miss the Target? (circle) Yes No

Did CEW Display Obtain Compliance: (circle) Yes No

Did CEW Deployment Obtain Compliance: (circle) Yes No

Did a Secondary Injury Occur to Offender: (circle) Yes No If Yes, please describe below:

Did Suspect Obtain Medical Evaluation: (circle) Yes No

Result: (circle) Signed Release Transported to Hospital Admitted due to Taser Deployment

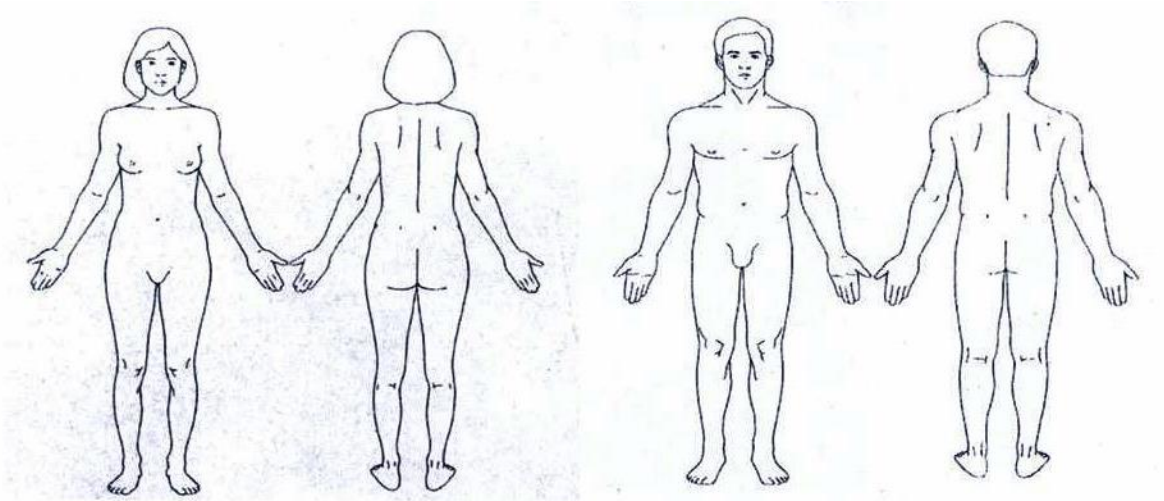
Did the Officer Sustain Injury?

Yes

No

If Yes, please describe below:

Application Areas
Place "X's" on probe contact points on diagram below



Officer Signature _____ Date: _____

Supervisor/Watch Commander Comments and Recommendation:

Supervisor Signature: _____ Date: _____

Deputy Chief Comments and Recommendation:

Deputy Chief Signature: _____ Date: _____