

Hanover Park Police Department**RESPONSE TO RESISTANCE REPORT**

Dir 205P App. A

Officer

Name: ID#: Assignment: Choose an item. Officer Injured? Choose an item.

Incident

Incident Location: Case #:
Jurisdiction (If not in HP): Video of Incident? Choose an item.
Nature of Initial Incident: Choose an item. Date Occurred: Time Occurred:
Supervisor Notified: Date/Time:

Subject 1

Name: Gender Choose an item. : DOB: Height: Weight:
Intoxicated? Choose an item. Mentally Impaired? Choose an item. Combative? Choose an item.
Weapon Reported : Choose an item. Other – Specify:
Weapon Discovered: Choose an item. Other – Specify:
Injury: Complaint of Injury?: Choose an item. Treated: Choose an item. Hospitalized: Choose an item.
Subject's Actions: Subject's Actions Other (Specify):
Officer's Response to Resistance: Choose an item. Other:
Officer's Response to Resistance: Choose an item. Other:

Subject 2

Name: Gender Choose an item. : DOB: Height: Weight:
Intoxicated? Choose an item. Mentally Impaired? Choose an item. Combative? Choose an item.
Weapon Reported : Choose an item. Other – Specify:
Weapon Discovered: Choose an item. Other – Specify:
Injury: Complaint of Injury?: Choose an item. Treated: Choose an item. Hospitalized: Choose an item.
Subject's Actions: Subject's Actions Other (Specify):
Officer's Response to Resistance: Choose an item. Other:
Officer's Response to Resistance: Choose an item. Other:

Officer Signature: _____ Date: _____

Supervisor/Watch Commander Comments and Recommendation:

Supervisor Signature: _____ Date: _____

Lieutenant Comments and Recommendation:

Lieutenant Signature: _____ Date: _____

Deputy Chief Comments and Recommendation:

Deputy Chief Signature: _____ Date: _____