



\_\_\_ Yes

\_\_\_ Yes

\_\_\_ No

\_\_\_ No

respect by the person assisting you?

8. Do you feel that you were treated courteously and with

\_\_\_\_ Not Applicable

\_\_\_\_ Not Applicable

## The University of Chicago Police Department 6054 South Drexel Avenue Chicago, IL 60637 773.702.8181

We value your feedback on University of Chicago Police Department services.

The University of Chicago Police Department is committed to providing high-quality law enforcement services to the University campus and surrounding communities. To assist us in evaluating and refining our services, please take a few

mon	nents to comple	te the following q	uestionnaire. Your res	sponses	evaluating and refining of will be kept confidential on at the end of this surv	al. If you w		
1.	What is your affStudentStaffFacultyCommunitVisitor	iliation with the Uni	iversity (optional)	9.	If not, what could we have	e done differe	ently?	
2.	Chicago Police		n the University of skip to question 11) Not Applicable	10.	Please rate the overall qua the University of Chicago Excellent Very Good		rtment.	
3.	If yes, what was the nature of the service provided by the department?  Response to emergency call Response to public emergency phone Response to non-emergency call Late-night umbrella coverage Help for stranded motorists Bicycle registration Laptop stop tag Engraving of valuables UCPD initiated contact (e.g. traffic stop, street stop) Other (please specify)			12.	GoodUnacceptable  Have you ever used any of the following crime prevention resources? (Please check all that apply) Common Sense: Your Guide to Safe Urban Living Safety information on designated campus bulletin boards Safety awareness alerts and security tips via e-mail Emergency phone map UCPD posters/fliers Victim assistance card Crime victim advocacy services Never used any crime prevention resources  Have you ever attended a safety presentation? YesNoNot Applicable ditional Comments			
4.	Was your servic time?Yes	e provided within a	reasonable amount of  Not Applicable					
5.	Was the person thorough?	who provided the se	rvice helpful and	Naı	ntact Information (optional)		_	
	Yes	No	Not Applicable	Ado Cit	dressS	State	_ Zip	
6.	Were all your qu	nestions answered to	your satisfaction?  Not Applicable	•	THANK YOU FO			
7.	Was the service you received performed to your satisfaction?				Please bring or mail this questionnaire to:			

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