



BERLIN POLICE DEPARTMENT – CITIZEN SURVEY

The Berlin Police Department is interested in hearing from the community about the services we provide. This survey is one way citizens have to let the department know how we are doing. Please take a moment to complete and return this questionnaire. The information will be used to help provide the best possible service to the citizens of the Town of Berlin. Thank you for your help.

If you have had more than one contact with the Berlin Police Department, please answer the following questions based on your most recent contact.

| Please answer each of the following questions by circling the number that corresponds to your response. If the statement does not apply to your situation, please circle the 0 under “Does Not Apply” and go to the next question. | | Yes | No | Does Not Apply |
|---|--|------------|-----------|-----------------------|
| 1. | Was your call handled promptly by the dispatcher (the person who received your call)? | 1 | 2 | 0 |
| 2. | Was the dispatcher professional and courteous? | 1 | 2 | 0 |
| 3. | Did an officer respond in a timely manner? | 1 | 2 | 0 |
| 4. | Was the officer professional and courteous? | 1 | 2 | 0 |
| 5. | Did the officer help you to understand how your complaint would be handled and what your responsibilities and alternatives might be? | 1 | 2 | 0 |
| 6. | Did you feel that the officer cared about resolving your problem or complaint? | 1 | 2 | 0 |
| 7. | Have you been re-contacted regarding the status of your problem or complaint? | 1 | 2 | 0 |

| Please rate the performance of the Berlin Police Department’s personnel you were in contact with recently. If you did not meet a person from the group mentioned, just circle the 0 under “Does Not Apply.” | | Excel- lent | Good | Poor | Does Not Apply |
|--|--|------------------------|-------------|-------------|-----------------------|
| 8. | How would you rate the service provided by the dispatcher? | 3 | 2 | 1 | 0 |
| 9. | How would you rate the service provided by the responding officer? | 3 | 2 | 1 | 0 |
| 10. | How would you rate the services provided by the detectives? | 3 | 2 | 1 | 0 |
| 11. | Overall, how would you rate the performance of the Berlin Police Department? | 3 | 2 | 1 | 0 |

| Please tell us how safe you feel in each of the following situations: | | Very Safe | Safe | Not Too Safe | Not Safe At All |
|--|--|------------------|-------------|---------------------|------------------------|
| 12. | How safe do you feel in and around your neighborhood during the day? | 4 | 3 | 2 | 1 |
| 13. | How safe do you feel in and around your neighborhood during the night? | 4 | 3 | 2 | 1 |
| 14. | Overall, how safe do you feel when you travel throughout the Town of Berlin? | 4 | 3 | 2 | 1 |

| D.A.R.E. (Drug Abuse Resistance Education) | | Yes | No | | |
|---|--|------------|-----------|--|--|
| 15. | Have you or your children been taught D.A.R.E. by a Berlin Police Officer? | Y | N | | |
| 16. | Do you feel D.A.R.E. is a useful program? | Y | N | | |

| Law Enforcement Contact | | Within the past | Within the past | Within the past | Within the past |
|--------------------------------|---|------------------------|------------------------|------------------------|------------------------|
| 17. | When was your last contact with the Berlin Police Department? | Week | Month | Year | 5 Years |

