### AGENCY SURVEY

AGENCY NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AGENCY ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AGENCY PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AGENCY FAX: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CHIEF EXECUTIVE OFFICER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACCREDITATION MANAGER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 1. AGENCY SIZE Authorized Actual

Sworn Officers \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Civilians \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

TOTALS \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

2. AGENCY WORKFORCE

SWORN Quantity

Patrol Officers \_\_\_\_\_\_\_\_\_

Investigation \_\_\_\_\_\_\_\_\_

Patrol Supervisors (Cpl./Sgt.) \_\_\_\_\_\_\_\_\_

Investigation Supervisors (Cpl./Sgt.) \_\_\_\_\_\_\_\_\_

Command (Lt./Capt.) \_\_\_\_\_\_\_\_\_

Executive (Maj. & above) \_\_\_\_\_\_\_\_\_

CIVILIAN Quantity

Clerical \_\_\_\_\_\_\_\_\_

Technical \_\_\_\_\_\_\_\_\_

Executive \_\_\_\_\_\_\_\_\_

3. SWORN PERSONNEL BREAKDOWN

RACE MALES (#) FEMALES (#)

White \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Black \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Hispanic \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Other \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

TOTAL \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

4. POPULATION OF JURISDICTION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Minority \_\_\_\_\_\_\_\_\_%

White \_\_\_\_\_\_\_\_\_%

5. SQUARE MILES OF JURISDICTION\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This survey was completed under my direction, includes this agency’s organizational chart and is submitted as a part of the application to the Administrator for South Carolina State Accreditation.

AGENCY CHIEF EXECUTIVE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_