



O.C.P.R. Service Request

Date of Request Date Needed

Requested By
Print Name Rank PC #

Signature Contact Phone

Unit Name Unit Number

Units that will assist in providing service, if known, (check all that apply):

- Alternate Response Section
- Auto Pounds Section
- Chaplains Section
- Court Section
- Training Division
- Field Services Section
- Professional Counseling Division
- Records Services Section
- Records Inquiry Section
- Research & Development Division

Please describe the service requested (attach additional pages if necessary). If urgent, include justification for the date needed. **Please direct inquiries regarding status of your request to the unit providing service.**

Approval (required through your chain of command):

Commander
Print Name Signature

Deputy Chief
Print Name Signature

Chief
Print Name Signature

After approval, please submit to:
Executive Director
Office of Constitutional Policing and Reform
Unit 120

DO NOT WRITE IN THIS BOX

Date Received: _____

Request Number: _____