

Limited English Proficiency Services

333.1 PURPOSE AND SCOPE

This policy provides guidance to members when communicating with individuals with limited English proficiency (LEP) (42 USC § 2000d).

333.1.1 DEFINITIONS

Definitions related to this policy include:

Bilingual - The ability to use two languages to a level of proficiency sufficient to participate effectively in a conversation on practical, social and professional topics, and the possession of a broad vocabulary, moderate accent and the comprehension level required for a normal rate of speech.

Bilingual Member - A member of the Department who has been tested and certified to provide language assistance through monolingual conversation in a language other than English.

Department Authorized Interpreter (DAI) - A member of the Department who has been tested and certified to provide interpretation services in the performance of official duties.

Department Authorized Interpreter List (DAI List) - A list of members of the Department who are authorized to provide interpretation services in the performance of official duties.

Interpretation - The act of listening to a communication in one language (source language) and orally converting it to another language (target language) by an individual possessing the distinct skills and knowledge of both languages to do so.

Language Assistance Tracking Data - Information collected to document an interpretation or monolingual conversation. Whenever language assistance is provided, the reporting (requesting) officer shall complete all Language Assistance fields within the Online or Incident Reporting Systems as applicable (ORS/IRS). If access to ORS/IRS is not available, the Language Assistance Tracking (PDCS-7042) shall be utilized.

Language Access Coordinator (LAC) - The Commanding Officer of the Community Relations Bureau (CRB) is designated as the Police Department Language Access Coordinator.

Language Access Plan - A roadmap that explains how the Department will provide police services to persons with limited English Proficiency (LEP).

Language Assistance Services - Assistance provided by a member of the Department in the form of interpretation, translation, or monolingual conversation in a language other than English.

Language Line - The contracted telephonic interpretation service that provides 24 hour access to interpreters in over 200 languages.

Lima Call - A call made to the Department 9-1-1 center that is designated by the call taker as apparently needing language assistance services.

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Lima Report- Statistical analysis of language assistance provided by members of the Department, including at minimum:

- (a) Comparisons of the number and disposition of Lima calls between each precinct and Departmental aggregate
- (b) A list of incomplete entries by officer
- (c) A list of Lima call case numbers by officer
- (d) A compliance ratio for officers handling Lima calls

Limited English Proficiency (LEP) - Individuals whose primary language is not English and who have a limited ability to read, write, speak or understand English. LEP designations are context specific: an individual may possess sufficient English language skills to function in one setting, but these skills may be insufficient in other situations. For example, an individual may possess sufficient English language skills to explain a motor vehicle accident, but may find these skills insufficient to describe the circumstances of a domestic dispute.

Primary Language - The language in which an individual most effectively communicates. Department personnel should avoid assumptions about an individual's primary language, and make every effort to ascertain an individual's primary language to ensure effective communication.

Source Language - The language of the original document or the principal speaker.

Target Language - The language into which someone translates or interprets.

Temporary Interpreter - Any member of the Department, or the general public, who is bilingual and capable of interpreting from the applicable source language into the required target language.

Translation - The replacement of written text from the source language into an equivalent written text in the target language by an individual possessing the distinct skills and knowledge of both languages to do so.

333.2 POLICY

This policy serves as the Department's Language Access Plan (LAP) and contains the procedures for providing Language Assistance Services to all residents of Suffolk County who require or request police service. It shall be updated annually and made available on the Department's website, in print at all facilities open to the public and distributed throughout the police district.

Department personnel shall provide language assistance services in accordance with the procedures contained in this LAP and shall make residents aware that such services are available to them free of charge.

No member of this Department shall inquire about or disclose, any individual's immigration status, unless such inquiry or disclosure is expressly required by law. Use of language assistance services shall not be deemed a basis for inquiring into any person's immigration status.

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333.3 REFERENCES

- (a) U.S. Department of Justice (DOJ) Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting LEP Individuals (67 Fed. Reg. 41455 (2002))
- (b) American Translators Association Code of Ethics and Professional Practice
- (c) WWW.LEP.GOV

333.4 COMMAND AND PERSONNEL RESPONSIBILITIES

333.4.1 LANGUAGE ACCESS COORDINATOR (LAC) RESPONSIBILITIES

The LAC is responsible to :

- (a) Coordinate and implement all aspects of language assistance services;
- (b) Create, maintain, update and distribute the LAP, and identify:
 - 1. Additional languages into which vital documents must be translated
 - 2. Additional documents or other information that must be translated.
- (c) Identify LEP populations that will likely require language assistance services by reviewing:
 - 1. Departmental records, including documentation of interpretations performed by Department personnel
 - 2. Language Line Solutions billing statements
 - 3. Information obtained from community based organizations such as school districts, hospitals and advocacy groups
 - 4. Information contained in the United States Census Bureau's American Communities Survey.
- (d) Audit a random selection of ten percent of the Language Assistance Tracking Data completed each quarter to ensure:
 - 1. The required information is being recorded accurately and completely.
 - 2. The proper interpretation protocols are being followed.
 - 3. Temporary interpreters are not used improperly.
 - 4. Interpretation assets are deployed properly.
 - 5. Deficiencies are referred back to the Commanding Officer of the reporting member.
- (e) Provide the Police Commissioner a comprehensive annual report on the Department's language assistance services.
- (f) Notify the public about Language Assistance Services.
- (g) Oversee the creation and maintenance of signage and vital documents.
 - 1. The list of vital documents will be created and maintained by the LAC

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2. Signage, website notices and vital documents shall be printed in English, Spanish, and other relevant languages as identified by the LAC.
 3. Signage and Language Identification Charts shall be conspicuously posted at the public entry points of all Department facilities, and on the home page of the Department's website stating in English, Spanish and other relevant languages that interpreters are available free of charge and that written forms and documents are available in languages other than English.
 4. Language Identification Charts shall be posted in all public facilities and maintained in all sector cars.
 5. The LAC shall procure the required signage in the required languages and arrange for delivery to each Department facility.
 6. On a quarterly basis the LAC, or designee, shall physically inspect each Department facility to ensure the required signage and literature is posted and/or available.
 7. Documents not available in an LEP's preferred language shall be read to the LEP individual in their preferred language utilizing a DAI, Bilingual member or the Language Line.
- (h) Represent the Department in its partnership with leaders from the Latino community and other communities with significant LEP populations in order to ensure effective implementation of the LAP.
1. The LAC will conduct a quarterly survey of the Latino community to gauge the effectiveness of the LAP.
 2. The LAC will analyze the results of each survey and implement measures to improve the plan.
 3. Results of the survey will be published in an annual report.

333.4.2 OFFICE OF THE POLICE COMMISSIONER RESPONSIBILITIES

The Office of the Police Commissioner shall:

- (a) Provide statistical analysis of the provision of language assistance.
- (b) Create Lima reports and disseminate them to the Chief of Patrol.

333.4.3 COMMANDING OFFICER RESPONSIBILITIES

Commanding Officers shall:

- (a) Ensure that the required signage, vital documents and other information are posted and visible to the general public entering their facility.
- (b) Ensure that subordinate personnel enter all appropriate Language Assistance Tracking Data when utilizing any language assistance services.
- (c) Review quarterly Lima Reports received from the Chief of Patrol and:
 1. Take necessary action to identify officers with incomplete entries.

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2. Take necessary action to identify officers who fail to provide language services where required.
3. Take remedial action as necessary.
4. Submit a response to the Chief of Patrol detailing reviews and actions taken.

333.4.4 INTERNAL AFFAIRS BUREAU RESPONSIBILITIES

The Internal Affairs Bureau (IAB) shall:

- (a) Investigate all complaints alleging denial of language access services.
- (b) Conduct monthly audits to determine if language assistance services are provided in accordance with this policy.
 1. Investigators shall identify Lima calls handled the previous month and contact those complainants to determine if the complainant received required/requested services, and if the complainant was satisfied with that service.
 2. Records of all actions taken shall be maintained by IAB.

333.4.5 ALL MEMBERS' RESPONSIBILITIES

All members of the Department shall:

- (a) Adhere to the procedures contained in this Section.
- (b) Immediately report to their supervisor any member of the Department who has wrongfully denied anyone language assistance services.

333.5 PROVISION OF LANGUAGE ASSISTANCE SERVICES

Members shall provide free language assistance to all individuals in need of such assistance.

333.5.1 LANGUAGE LINE SOLUTIONS

- (a) All members have access to the Language Line service 24 hours a day, seven days a week.
- (b) Dual handset Language Line telephones are available to the public at:
 1. The front desk of every Precinct and Headquarters
 2. Crime Section and Detective Squad in every Precinct
 3. Airport Operations Section
 4. Public window of Central Records Section
 5. Domestic Violence Section
 6. Hate Crimes Section
 7. Homicide Section
 8. Internal Affairs Bureau
 9. Marine Bureau desk
 10. Marine Bureau – Fire Island (two phones)

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11. Pistol Licensing Bureau
 12. Police Academy Bureau (West)
 13. Special Victims Section
 14. Special Patrol Bureau
- (c) Cell phones programmed to automatically dial Language Line and VoIP-enabled tablet computers programmed to access Language Line are deployed in numerous patrol units throughout the police district.

333.5.2 PROCEDURE FOR PROVIDING INTERPRETATION SERVICES TO 9-1-1 CALLERS

- (a) When a 9-1-1 operator determines that a caller has LEP, the operator shall ascertain the caller's primary language.
1. If the operator determines that the caller's primary language is Spanish, the operator shall patch the call directly to a Spanish speaking operator. If no Spanish speaking operator is available, the operator shall utilize Language Line.
 2. If the operator determines that the caller's primary language is other than Spanish, the operator will immediately call Language Line.
 3. The operator will note in the Computer Aided Dispatch system "remarks" section that the caller has LEP, will specify the caller's language, and will assign an "L" designation to the call.
- (b) Dispatchers will make every effort to dispatch a DAI or a bilingual officer, as available, to calls involving LEP individuals.

333.5.3 PROCEDURE FOR PROVIDING INTERPRETATION SERVICES IN THE FIELD

- (a) All members of the Department who must communicate with an individual whose primary language is not English shall determine if the individual is LEP. If Communications Section has assigned an "L" or "Lima" designation to a call, the responding member(s) shall presume that the complainant possesses limited English proficiency, and shall offer language assistance services to such person.
- (b) If the individual is LEP the responding officer shall then determine the individual's primary language, using the Language Identification Memorandum Book Insert (PDCS-7044) if necessary.
- (c) If the responding officer is designated as a Bilingual Officer or DAI in the LEP individual's primary language, the responding officer may engage the individual in monolingual conversation. If the responding officer determines at any point that they do not possess sufficient language skills to provide service, that officer shall request language assistance from the Communications Section as described below
1. A responding officer who is a DAI or Bilingual Officer shall enter all Language Assistance Tracking Data into ORS/IRS. If access to ORS/IRS is not available, the Language Assistance Tracking (PDCS-7042) shall be utilized.
- (d) If the responding officer is not designated as a Bilingual Officer/Member or a DAI in the LEP's primary language, the responding officer shall:

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1. Determine if exigent circumstances are present using any means at their disposal.
 2. If exigent circumstances are not present, request language assistance from the Communications Section.
 3. The Communications Section shall determine if a DAI or Bilingual Officer/Member is available.
 4. If no DAI or Bilingual Officer/Member is available, the Communications Section will advise the responding officer to utilize Language Line.
 5. If a DAI is assigned to assist, that DAI may provide interpretation services to the responding officer.
 6. If a Bilingual Officer/Member is assigned to assist, that officer/member may communicate with the LEP individual in order to assist the responding officer handling the call. All language assistance tracking data shall be entered into the Online Reporting System and Incident Reporting System (ORS/IRS). If access to ORS/IRS is not available, the Language Assistance Tracking (PDCS-7042) shall be utilized.
- (e) Under exigent circumstances, personnel who must communicate with LEP individuals in dangerous or rapidly developing situations may temporarily use any available interpreter. Temporary interpreters may include bilingual bystanders, including friends and family members of the LEP individual. When using a temporary interpreter, responding officers shall:
1. Consider the chosen interpreter's apparent proficiency in both the source and target languages, and shall also consider any apparent bias, personal interest, or confidentiality issues.
 2. Develop and ask all questions. A temporary interpreter shall not be permitted to independently question an LEP individual.
 3. Evaluate the conduct of the temporary interpreter for signs of poor interpretation such as the interpreter's statements being considerably longer or shorter than those of the LEP individual, the interpreter engaging in multiple side conversations with either the LEP individual or the responding officer, or the LEP individual appearing frustrated, or opting to speak broken English despite the efforts of the interpreter.
 4. Only utilize children as temporary interpreters as a last resort. Using children exposes them to potential emotional harm and can result in damaging their familial relationships once the police have left. Children may also render inaccurate information in an effort to protect member(s) of their family.
 5. Discontinue the use of any temporary interpreter that is performing poorly.
- (f) When the circumstances giving rise to the exigency have passed, responding officers shall determine whether a continued need for interpretation services exists.
1. If police service can be rendered based upon the information already received from the LEP individual, no need for further interpretation services exists.

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2. If police service cannot be rendered based upon the information relayed by the temporary interpreter, the responding officer shall request language assistance from the Communications Section. For the purposes of this policy, police service cannot be rendered if at any time the responding officer determines that the quality of interpretation is suspect.
3. Whenever information is obtained through the use of a temporary interpreter, responding officers shall enter all Language Assistance Tracking Data into ORS/IRS. If access to ORS/IRS is not available, the Language Assistance Tracking (PDCS-7042) shall be utilized.

333.6 INTERROGATION, INTERVIEWS, AND COMPLAINTS

Whenever a written statement must be taken from an individual with LEP:

- (a) If a DAI or Language Line is utilized, the investigating officer shall record the statement.
- (b) If a Bilingual Member is utilized, that member will record the statement.
- (c) The Department member taking the statement shall read it back to the LEP individual in their primary language to confirm its accuracy.

333.6.1 CRIMINAL SUSPECTS WITH LEP

- (a) Any written statement taken from a LEP suspect must be taken utilizing a DAI or a Bilingual Member. If neither is available the investigating officer shall utilize Language Line.
 1. Miranda warning forms shall be given and read in the suspect's primary language, utilizing a DAI, Bilingual Member, or the Language Line.
 2. When conducting an interrogation or interview for an associated agency, members of the Department may utilize an interpreter designated by that agency.
- (b) Members of the Department who utilize a DAI or Bilingual Member when taking a suspect's statement shall record within that statement and in ORS/IRS:
 1. The date, time and location of the statement.
 2. The DAI or Bilingual Officer/Member name, rank and command.
 3. The source and target languages.
 4. If access to ORS/IRS is not available, the Language Assistance Tracking (PDCS-7042) shall be utilized.
 5. That the statement was read back to the LEP individual in their primary language.
- (c) Members of the Department who utilize Language Line when taking a suspect's statement shall record within that statement and in ORS/IRS:
 1. The date, time and location of the statement.
 2. The name, contact information and Identification Number of the interpreter.
 3. The source and target languages.

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4. If access to ORS/IRS is not available, the Language Assistance Tracking (PDCS-7042) shall be utilized.
5. That the statement was read back to the LEP individual in their primary language.

333.6.2 VICTIMS AND WITNESSES WITH LEP

All written statements shall be taken utilizing language assistance.

- (a) The name and contact information for the interpreter utilized, along with the date, time, location, source and target languages, and Language Line Interpreter Identification Number, if applicable, will be recorded within the victim /witness statement, and entered into ORS/IRS. If access to ORS/IRS is not available, the Language Assistance Tracking (PDCS-7042) shall be utilized.

333.6.3 COMPLAINTS AGAINST DEPARTMENT PERSONNEL

- (a) Any LEP individual that wishes to file a complaint against any member of the Department for any reason shall be provided language assistance in their primary language.
- (b) The member of the Department taking the complaint shall record the name and contact information for the interpreter utilized, along with the date, time, location, source and target languages, and Language Line Interpreter Identification Number, if applicable, into ORS/IRS. If access to ORS/IRS is not available, the Language Assistance Tracking (PDCS-7042) shall be utilized.
- (c) The disposition of all complaints shall be provided to the LEP complainant in his or her primary language.

333.6.4 DOMESTIC INCIDENT REPORTS

- (a) When language assistance services are utilized to assist members in completing domestic incident reports, the reporting member shall confirm the accuracy of all information received from the Limited English Proficiency (LEP) individuals by having such information read back to the LEP individual in the LEP individual's primary language; this task shall be performed by the language assistance service utilized throughout the interaction, i.e., Department Authorized Interpreter, certified bi-lingual member, or Language Line services.

333.7 TRANSLATION SERVICES

- (a) The Community Relations Bureau (CRB) shall oversee all translation functions within the Department.
 1. CRB shall maintain a list of Department members authorized to perform translations.
 2. CRB shall coordinate all translation services provided by contract vendors.
- (b) Members receiving correspondence in a language other than English shall contact CRB for translation assistance.

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1. CRB shall utilize Department Authorized Translators before sending correspondence out to contract vendors.
 2. The Commanding Officer of the Internal Affairs Bureau, or designee, may coordinate directly with Department Authorized Translators, or outside vendors to preserve the confidentiality of correspondence when necessary.
 3. All translations shall occur within seven days of receipt of the original correspondence.
- (c) Compliment Complaint Information Reports (PDCS-1300-1) in languages other than English will indicate on the form that:
1. Interpretation services are available at no cost at all Police facilities or over the phone; and
 2. The Internal Affairs Bureau maintains a dedicated telephone number for Spanish speaking complainants.

333.8 TRAINING

- (a) The Department will conduct annual training on LEP policies and procedures for all members.
- (b) The Language Access Coordinator shall coordinate with the Police Academy Bureau to create and update a comprehensive training curriculum.
- (c) The Police Academy Bureau will maintain the curriculum and conduct training to include classroom instruction, Decentralized Individualized In-Service Training (D.I.I.T.), and Department Training Bulletins.
- (d) The Department will provide 20 hours of Spanish Culture and Language training in its Recruit Training Program which will include all LEP policies and procedures.
- (e) In-Service members will receive annual training in the following:
 1. How to identify the language assistance needs of an LEP individual during an in-person or telephone interaction.
 2. How to access Department Authorized Interpreters, Bilingual Officers/ Members, Language Line Solutions and the use of interpreters during exigent circumstances.
 3. How to work with interpreters and assess interpreter quality.
 4. How to account for cultural diversity and language barriers in policing.
 5. Basic phrases, terms and commands in Spanish.
- (f) Officers will be issued a Spanish Language Guide Memo Book Insert (PDCS-7041) to assist them in police related situations involving LEP individuals.
- (g) All members shall complete the Language Line Decentralized Individualized In-service Training (D.I.I.T.) film annually.

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333.9 QUALIFICATIONS

333.9.1 FLUENCY SURVEYS

- (a) All members of the Department shall complete a Foreign Language Fluency Questionnaire (PDCS-7043) detailing their proficiency in any languages other than English as part of their new-hire processing. The supervisor of the Personnel Section shall maintain this information in the Personnel System.
- (b) The LAC shall compile and maintain the list of DAIs and Bilingual Members in ORS/IRS.

333.9.2 SKILL CERTIFICATIONS

- (a) Members of the Department seeking inclusion on the DAI/ Bilingual Member list will make a request for inclusion to the LAC.
- (b) The LAC will schedule skills testing via the contract vendor. Tests will be scheduled on an as needed basis and will evaluate the member's:
 - 1. Fluency in English and the tested language
 - 2. Knowledge of basic police terminology
 - 3. Accuracy of interpreting
 - 4. Attentive listening
 - 5. Information retention
 - 6. Ability to follow instructions
 - 7. Role of the interpreter and ethical considerations
- (c) Members obtaining certification from the vendor will be placed on the appropriate list.
- (d) Members who are unable to obtain certification will be eligible to re-test at the LAC's discretion.
- (e) The LAC shall monitor and schedule re-certification tests for each member on the list.
 - 1. Members who do not pass re-certification shall be removed from the list.
 - 2. Any member unable to pass re-certification shall be permitted to schedule a re-test at the discretion of the LAC.
- (f) DAIs seeking certification as translators will make a request to the LAC.
 - 1. The LAC will schedule translator certification tests with the designated contract vendor on an as-needed basis.
 - 2. DAIs passing the designated translation skills test shall be designated as "Translators" on the DAI list.
 - 3. The LAC shall schedule re-certification tests of each member designated as a "Translator". Members who do not pass re-assessment shall have the "Translator" designation removed.

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333.10 FORMS

Forms related to this policy include:

[Compliment-Complaint Information Report \(PDCS-1300-1\)](#)

[Foreign Language Fluency Questionnaire \(PDCS-7043\)](#)

[Language Assistance Tracking \(PDCS-7042c\)](#)

[Language Identification Memorandum Book Insert \(PDCS-7044\)](#)

[Spanish Language Guide Memo Book Insert \(PDCS-7041\)](#)

Attachments

Compliment-Complaint Information Report (PDCS-1300-1).pdf



POLICE DEPARTMENT, COUNTY OF SUFFOLK, N.Y.
 ACCREDITED LAW ENFORCEMENT AGENCY
COMPLIMENT/COMPLAINT INFORMATION REPORT

PDCS-1300-1e

INTERNAL AFFAIRS BUREAU USE ONLY	
Received:	_____
IAB #:	_____

The Suffolk County Police Department is committed to providing the highest quality police services to each and every member of the community and your input is important to us. If you have a compliment or a complaint concerning an SCPD employee, please do **ONE** of the following:

- Complete this form and submit it directly to any SCPD precinct, or to Police Headquarters, or fax it to **(631) 852-6259**.
- Mail form to: **Suffolk County Police Headquarters, Internal Affairs Bureau, 30 Yaphank Avenue, Yaphank, NY 11980**
Or to: Suffolk County Human Rights Commission, 100 Veterans Memorial Highway #1, Hauppauge, NY 11788
- Telephone the Internal Affairs Bureau at **(631) 852-6265**, or free of charge by dialing **1-855-IAB-SCPD** (Un operador estará disponible en español).
- Telephone the **Suffolk County Human Rights Commission** at **(631) 853-5480**.
- E-mail the Internal Affairs Bureau at: SCPD.INTERNALAFFAIRS@suffolkcountyny.gov.

Check the appropriate category: Compliment Complaint **CC #** (if applicable): _____

Did you file this complaint with another agency: No Yes, Agency Name: _____

Name: Last, First, M.I.		Date of Birth:
Address:		Home Phone Number:
Email Address:	Cell Phone Number:	Work Phone Number:
<input type="checkbox"/> Permission to Contact		
Race/Ethnicity (Optional): <input type="checkbox"/> Asian <input type="checkbox"/> American Indian <input type="checkbox"/> Black <input type="checkbox"/> Middle Eastern <input type="checkbox"/> Mixed Heritage <input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic		
<input type="checkbox"/> Prefer Not to Answer <input type="checkbox"/> Other _____		
Gender (Optional): <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Trans Male <input type="checkbox"/> Trans Female		Preferred Pronoun (Optional): <input type="checkbox"/> She <input type="checkbox"/> He <input type="checkbox"/> They
<input type="checkbox"/> Genderqueer/Gender Non-binary <input type="checkbox"/> Not Listed <input type="checkbox"/> Prefer Not to Answer		<input type="checkbox"/> No Preference <input type="checkbox"/> Other _____

Preferred Language: <input type="checkbox"/> English <input type="checkbox"/> Spanish	Language Interpretation Services Needed: <input type="checkbox"/> No	
<input type="checkbox"/> Other _____	<input type="checkbox"/> Yes, Language _____	
Person Assisting (Interpreter, Representative):	Relationship:	Contact Phone Number:

If Applicable: Witness Name: Last, First, M.I.	Home Phone Number:
Address:	Cell Phone Number:

INCIDENT

Date of Incident:	Time Of Incident:	Location of Incident:
Video/Audio Recording of Incident: <input type="checkbox"/> No <input type="checkbox"/> Yes		

EMPLOYEE INFORMATION (If Known)

<input type="checkbox"/> Female <input type="checkbox"/> Male	Name:	Rank/Title:	Command:	Shield:
<input type="checkbox"/> Plainclothes <input type="checkbox"/> Uniform	<input type="checkbox"/> On Foot <input type="checkbox"/> In Car	<input type="checkbox"/> Marked Car <input type="checkbox"/> Unmarked	Patrol Car #:	License Plate #:
Physical Description of Employee (eye color, hair color, approximate height and build, age, etc.):				

DESCRIPTION OF INCIDENT (please include as much detail as possible)

Would you like a Police Department supervisor to contact you with regard to your comments? Yes No

Date: _____

Signature: _____

Foreign Language Fluency Questionnaire (PDCS-7043).pdf



POLICE DEPARTMENT, COUNTY OF SUFFOLK, N.Y.
ACCREDITED LAW ENFORCEMENT AGENCY
FOREIGN LANGUAGE FLUENCY QUESTIONNAIRE

Name: _____ **Shield:** _____

Rank/Title: _____ **Command:** _____

The Suffolk County Police Department maintains a comprehensive database of members who possess various degrees of fluency in foreign languages (other than English).

The Interagency Language Roundtable (ILR) scale is a set of descriptions of abilities to communicate in a language.

Please review the ILR proficiency levels listed below. For any foreign language(s) in which you meet one of the proficiency levels, please enter the name of that language under the proficiency level which best describes your ability to communicate.

At this time, if you do not possess foreign language proficiency as defined below, please indicate so by checking the English Only box. If your ability to communicate in any foreign language should change in the future, you may update this information.

English Only

Professional Working Proficiency:

The ILR describes Professional Working proficiency as the ability to participate effectively in a language in most formal and informal conversations on practical, social, and professional topics. This includes possessing a broad vocabulary, moderate accent, and comprehension which is quite complete for a normal rate of speech.

Language: _____ Language: _____ Language: _____

Full Professional Proficiency:

The ILR describes Full Professional proficiency as the ability to use the language fluently and accurately on all levels normally pertinent to professional needs. This includes the ability to understand and participate in conversations with a high degree of fluency and precision of vocabulary. Though rarely taken for a native speaker, can handle informal interpreting from and into the language.

Language: _____ Language: _____ Language: _____

Native or Bilingual Proficiency:

The ILR describes Native or Bilingual proficiency as possessing speaking proficiency equivalent to that of an educated native speaker, including complete fluency in the language, such that speech on all levels is fully accepted by educated native speakers in all its features.

Language: _____ Language: _____ Language: _____

Language Assistance Tracking (PDCS-7042c).pdf



CC # (If one was drawn - a CC# is not mandatory)

<input type="checkbox"/> Dept. Authorized Interpreter (DAI)	<input type="checkbox"/> Temporary Interpreter - SCPD	<input type="checkbox"/> Language Line Services : LL Interpreter ID# _____
<input type="checkbox"/> Certified Bilingual Member	<input type="checkbox"/> Temporary Interpreter - non-SCPD	

Date of Assistance:		Assistance Start Time:		Assistance End Time:	
Assisted with which Language:		Location of Assistance:			
Name of Individual Requiring Assistance:		Name of Victim (if applicable)		Name of Witness (if applicable)	
Member Providing Assistance (Name - Last, First, MI):			Rank/Title		Shield
Non-Member Assistance Contact Info (Name - Last, First, MI):			Address:		Telephone:
Relationship of Assistant (if any) to LEP individual:			E-Mail:		

How many interpreters assisted? _____	Complete if more than 1 interpreter assisted (use back of form to enter additional interpreters)				
<input type="checkbox"/> Dept. Authorized Interpreter (DAI)	<input type="checkbox"/> Temporary Interpreter - SCPD				
<input type="checkbox"/> Certified Bilingual Member	<input type="checkbox"/> Temporary Interpreter - non-SCPD				
<input type="checkbox"/> Language Line Services : LL Interpreter ID# _____					
Member Providing Assistance (Name - Last, First, MI):			Rank/Title		Shield
Non-Member Assistance Contact Info (Name - Last, First, MI):			Address:		Telephone:
Relationship of Assistant (if any) to LEP individual:			E-Mail:		

Member Requesting Assistance:		Rank/Title		Shield	Command
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Summary of Action Taken: Criminal Arrest No Arrest Non-Criminal

No Language Assistance Required

The 911 caller was not involved in the incident; The 911 caller is gone on arrival of police; Aided Case – Not a victim of violence

The 911 caller wishes to remain anonymous; The victim/complainant spoke sufficient English to effectively communicate;

Other (provide clear explanation as to why no language assistance was required if none of the above are applicable):

Supervisor:		Rank/Title		Shield	Command
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Entered into Database by:			Command:	Date Entered:
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<input type="checkbox"/> Dept. Authorized Interpreter (DAI) <input type="checkbox"/> Temporary Interpreter - SCPD <input type="checkbox"/> Certified Bilingual Member <input type="checkbox"/> Temporary Interpreter - non-SCPD <input type="checkbox"/> Language Line Services : LL Interpreter ID# _____				
Member Providing Assistance (Name - Last, First, MI):		Rank/Title	Shield	Command
Non-Member Assistance Contact Info (Name - Last, First, MI):		Address:		Telephone:
Relationship of Assistant (if any) to LEP individual:			E-Mail:	

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**Language Identification Memorandum
Book Insert (PDCS-7044).pdf**

SUFFOLK COUNTY POLICE DEPARTMENT

ACCREDITED LAW ENFORCEMENT AGENCY

LANGUAGE IDENTIFICATION

ENGLISH: Point to your language. An interpreter will be called. The interpreter is provided at no cost to you.

SPANISH (Español)



Señale su idioma y llamaremos a un intérprete. El servicio es gratuito.

CHINESE - Mandarin (国语/普通话)



请指认您的语言，以便为您提供免费的口译服务

POLISH (Polski)



Proszę wskazać swój język i wezwiemy tłumacza. Tłumacza zapewnimy bezpłatnie.

ITALIAN (Italiano)



Puntare sulla propria lingua. Un interprete sarà chiamato. Il servizio è gratuito.

PORTUGUESE (Português)



Indique o seu idioma. Um intérprete será chamado. A interpretação é fornecida sem qualquer custo para você.

HAITIAN CREOLE (Kreyòl)



Lonje dwèt ou sou lang ou pale a epi n ap rele yon entèprèt pou ou. Nou ba ou sèvis entèprèt la gratis.

RUSSIAN (Русский)



Укажите язык, на котором вы говоритею.
Вам вызовут лереводчика. Услути
лереводчика предоставляются Бесплатно.

How to Access Language Line Services

Language Line Services provides interpretations in over 200 languages. Language Line will be used during any interaction with persons who are Limited English Proficient (LEP).

Language Line Services can be utilized from ANY phone.

The procedure is as follows:

1. Ascertain the language spoken by the individual (this can be accomplished by using the *Interpretation Service Available* pamphlets provided with the telephones) or their Country of origin if language cannot be determined.
2. Dial **1-800-523-1786**
3. Provide the Client ID: **102027**
4. Select language by pressing:
 - 1 - Spanish;
 - 2 - All other languages and state the language;
 - 0 - For assistance if language is unknown.
5. Provide the following information to the representative answering the phone:
 - a) Department member's shield number (civilian employees must provide their name)
 - b) Language spoken (if known)
6. An interpreter will come on the line. Briefly summarize what you wish to accomplish and provide any additional details.
7. To facilitate translation, if circumstances are conducive to using the speaker phone function, press the speaker button. If not, pass the cell phone between yourself and the person with Limited English Proficiency.

PDCS-7044

**Spanish Language Guide Memo
Book Insert (PDCS-7041).pdf**



**SUFFOLK COUNTY
POLICE DEPARTMENT**

SPANISH LANGUAGE GUIDE



**SUFFOLK COUNTY
POLICE DEPARTMENT**

SPANISH LANGUAGE GUIDE

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THE SPANISH ALPHABET

The Spanish language consists of the same letters as the English alphabet and these four additional characters: CH, LL, Ñ, RR. Each of these characters is considered as a distinct letter in the Spanish alphabet.

- CH:** Is pronounced like the “CH” in “Church” at all times.
LL: Like the English consonant “Y” as in “Ella” (her).
N: Like the “NY” in “Canyon”.
RR: Very strongly trilled as in “Carro:” (Car). The RR is the most difficult sound for the English speaker because it has no English counterpart. The pronunciation is achieved by striking the tip of the tongue against the teethridge and vibrating the “R” sound.

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Alphabet Pronunciation:

A	B	C	CH	D	E	F
ah	beh	seh	cheh	deh	eh	eh-feh
G	H	I	J	K	L	LL
neh	ah-cheh	ee	ho-ta	ka	eh-teh	eh-yeh
M	N	Ñ	O	P	Q	R
eh-meh	eh-neh	eh-nyeh	oh	Peh	Koo	eh-reh
RR		S	T	U	V	
eh-rreh		eh-seh	teh	oo	veh-chica	
W		X		Y		Z
doh-ble-hoo		eh-kees	ee-gree-yeh-ga			seh-ta

NUMBERS

0 - Cero	19 - Diez Nueve
1 - Uno (un, Una)	20 - Veinte
2 - Dos	30 - Treinta
3 - Tres	40 - Cuarenta
4 - Cuatro	50 - Cincuenta
5 - Cinco	60 - Sesenta
6 - Seis	70 - Setenta
7 - Siete	80 - Ochenta
8 - Ocho	90 - Noventa
9 - Nueve	100 - Cien (Ciento)
10 - Diez	200 - Doscientos (Doscientas)
11 - Once	300 - Trescientos (Trescientas)
12 - Doce	400 - Cuatrocientos (Cuatrocientas)
13 - Trece	500 - Quinientos (Quinientas)
14 - Catorce	600 - Seiscientos (Seiscientas)
15 - Quince	700 - Setecientos (Setecientas)
16 - Diez y Seis	800 - Ochocientos (Ochocientas)
17 - Diez y Siete	900 - Novcientos (Novcientas)
18 - Diez y Ocho	1,000 - Mil

Alphabet Pronunciation:

A	B	C	CH	D	E	F
ah	beh	seh	cheh	deh	eh	eh-feh
G	H	I	J	K	L	LL
neh	ah-cheh	ee	ho-ta	ka	eh-teh	eh-yeh
M	N	Ñ	O	P	Q	R
eh-meh	eh-neh	eh-nyeh	oh	Peh	Koo	eh-reh
RR		S	T	U	V	
eh-rreh		eh-seh	teh	oo	veh-chica	
W		X		Y		Z
doh-ble-hoo		eh-kees	ee-gree-yeh-ga			seh-ta

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NUMERO POR NUMERO = NUMBER BY NUMBER
SPANISH ALPHABET/NUMBERS

1

NUMERO POR NUMERO = NUMBER BY NUMBER
SPANISH ALPHABET/NUMBERS

1

DAYS OF THE WEEK

SUNDAY DOMINGO
MONDAY LUNES
TUESDAY MARTES
WEDNESDAY MIERCOLES
THURSDAY JUEVES
FRIDAY VIERNES
SATURDAY SABADO

MONTHS OF THE YEAR

JANUARY ENERO
FEBRUARY FEBRERO
MARCH MARZO
APRIL ABRIL
MAY MAYO
JUNE JUNIO
JULY JULIO
AUGUST AGOSTO
SEPTEMBER SEPTIEMBRE
OCTOBER OCTUBRE
NOVEMBER NOVIEMBRE
DECEMBER DICIEMBRE

GREETINGS AND FAREWELLS

1. GOOD MORNING, MISS.
BUENOS DIAS SEÑORITA.
2. GOOD AFTERNOON.
BUENAS TARDES.
3. GOOD EVENING, SIR. (GOOD NIGHT)
BUENAS NOCHES SEÑOR.
4. HOW ARE YOU ?
¿COMO ESTA USTED?

DAYS OF THE WEEK

SUNDAY DOMINGO
MONDAY LUNES
TUESDAY MARTES
WEDNESDAY MIERCOLES
THURSDAY JUEVES
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SATURDAY SABADO

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FEBRUARY FEBRERO
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2. GOOD AFTERNOON.
BUENAS TARDES.
3. GOOD EVENING, SIR. (GOOD NIGHT)
BUENAS NOCHES SEÑOR.
4. HOW ARE YOU ?
¿COMO ESTA USTED?

5. VERY WELL, THANK YOU.
MUY BIEN, GRACIAS
6. HELLO.
HOLA.
7. GOODBY.
ADIOS.
8. SO LONG.
HASTA LUEGO.

LOW RISK FRISK

1. STOP!
¡ALTO!
2. PUT YOUR HANDS UP!
¡MANOS ARRIBA!
3. SLOWLY TURN AROUND!
¡ESPACIO VOLTEESE!
4. PUT YOUR HANDS BEHIND YOUR BACK/HEAD, PALMS TOGETHER!
¡PONGA SUS MANOS, ATRAS DE SU ESPALDACABEZA, CON SUS PALMAS JUNTAS!
5. SPREAD YOUR FEET!
¡ABRA SUS PIES!
6. CROSS YOUR FINGERS!
¡CRUCE SUS DEDOS!
7. DON'T MOVE!
¡NO SE MUEVA!

5. VERY WELL, THANK YOU.
MUY BIEN, GRACIAS
6. HELLO.
HOLA.
7. GOODBY.
ADIOS.
8. SO LONG.
HASTA LUEGO.

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¡ABRA SUS PIES!
6. CROSS YOUR FINGERS!
¡CRUCE SUS DEDOS!
7. DON'T MOVE!
¡NO SE MUEVA!

**DAYS OF THE WEEK/MONTHS OF THE YEAR
GREETINGS AND FAREWELLS/SLOW RISK FRISK**

2

**DAYS OF THE WEEK/MONTHS OF THE YEAR
GREETINGS AND FAREWELLS/SLOW RISK FRISK**

2

HIGH RISK FRISK

1. STOP!
POLICE!
POLICIA!
!ALTO!
2. PUT YOUR HANDS
SPREAD YOUR FINGERS!
(HIGHER)
!ABRA SUS DEDOS!
!MANOS ARRIBAI (MAS)
3. SLOWLY WITH YOUR HANDS UP, COME DOWN TO
YOUR KNEES!
!CON SUS MANOS ARRIBA DESPACIO, BAJESE A SUS
RODILLAS!
4. SLOWLY, WITH YOUR HANDS IN FRONT OF YOU,
COME DOWN TO YOUR STOMACH!
!DESPACIO, CON SUS MANOS EN FRENTE DE USTED
ACUESTESE BOCA ABAJO!
5. BURY YOUR FOREHEAD!
!PONGA SU FRENTE EN EL SUELO!
6. PUT YOUR ARMS OUT TO YOUR SIDE, PALMS UP!
!PONGS SUS BRAZOS A SUS LADOS, CON LAS PALMAS
BOCA ARRIBAI!
7. SPREAD YOUR LEGS!
!ABRA SUS PIERNASI!
8. BURY YOUR HEELS!
!PONGA SUS TALONES EN EL SUELO!
9. PUT YOUR RIGHT/LEFT HAND ON THE SMALL OF
YOUR BACK, PALM UP!
!PONGA SU MANO DERECHA/IZQUIERDA EN EL MEDIO
DE SU ESPALDA, CON LA PALMA BOCA ARRIBAI!
10. PUT YOUR RIGHT/LEFT HAND ON TOP OF YOUR
RIGHT/LEFT HAND WITH THE PALM UP!
!PONGA SU MANO DERECHA/IZQUIERDA ARRIBA DE
SU MANO DERECHA/IZQUIERDA! !CON LA PALMA
BOCA ARRIBAI!
11. TURN YOUR HEAD TO THE LEFT!
!VOLTEE SU CABEZA, A LA IZQUIERDA!
* **LEFT HANDED OFFICERS:** VOLTEE SU CABEZA, A
LA DERECHA!

HIGH RISK FRISK

1. STOP!
POLICE!
POLICIA!
!ALTO!
2. PUT YOUR HANDS
SPREAD YOUR FINGERS!
(HIGHER)
!ABRA SUS DEDOS!
!MANOS ARRIBAI (MAS)
3. SLOWLY WITH YOUR HANDS UP, COME DOWN TO
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11. TURN YOUR HEAD TO THE LEFT!
!VOLTEE SU CABEZA, A LA IZQUIERDA!
* **LEFT HANDED OFFICERS:** VOLTEE SU CABEZA, A
LA DERECHA!

12. DON'T MOVE!
¡NO SE MUEVA!

REMOVAL OF HIGH RISK SUSPECTS FROM THE VEHICLE

PUT YOUR HANDS OUTSIDE THE WINDOWS.
PONGA SUS MANOS AFUERA DE LA VENTANA.

DRIVER, SLOWLY WITH YOUR LEFT HAND TURN OFF THE
ENGINE AND DROP THE KEYS OUTSIDE.
CHOFER, DESPACIO CON SU MANO IZQUIERDA APAGUE
EL MOTOR Y SUETE LAS LAVES AFUERA.

DRIVER, WITH YOUR RIGHT HAND, OPEN THE DOOR FROM
OUTSIDE.

CHOFER, DESPACIO CON SU MANO DERECHA ABRA LA
PUERTA POR AFUERA.

DRIVER, SLOWLY WITH YOUR HANDS UP, GET OUT OF
THE CAR.
CHOFER, DESPACIO CON SUS MANOS ARRIBA BAJESE
DEL CARRO

TURN AROUND. STOP
VOLTEESE. ALTO

WALK BACKWARDS. STOP.
CAMINE PARA ATRAS, ALTO.

WALK TO THE RIGHT OR LEFT.
CAMINE A LA DERECHA O IZQUIERDA.

WITH YOUR HANDS UP, SLOWLY COME DOWN TO YOUR
KNEES.
CON SUS MANOS ARRIBA DESPACIO BAJESE A SUS
RODILLAS.

PASSENGER, SLOWLY WITH YOUR HANDS UP, GET OUT
OF THE CAR THROUGH THE DRIVER SIDE.
PASAJERO DESPACIO CON SUS MANOS ARRIBA BAJESE
DEL CARRO DEL LADO DEL CHOFER.

MOVE SUSPECT BACK. CONTINUE WITH HIGH RISK SEARCH.

**HIGH RISK FRISK/
REMOVAL OF HIGH RISK SUSPECTS FROM VEHICLE** **3**

12. DON'T MOVE!
¡NO SE MUEVA!

REMOVAL OF HIGH RISK SUSPECTS FROM THE VEHICLE

PUT YOUR HANDS OUTSIDE THE WINDOWS.
PONGA SUS MANOS AFUERA DE LA VENTANA.

DRIVER, SLOWLY WITH YOUR LEFT HAND TURN OFF THE
ENGINE AND DROP THE KEYS OUTSIDE.
CHOFER, DESPACIO CON SU MANO IZQUIERDA APAGUE
EL MOTOR Y SUETE LAS LAVES AFUERA.

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DRIVER, SLOWLY WITH YOUR HANDS UP, GET OUT OF
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VOLTEESE. ALTO

WALK BACKWARDS. STOP.
CAMINE PARA ATRAS, ALTO.

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MOVE SUSPECT BACK. CONTINUE WITH HIGH RISK SEARCH.

**HIGH RISK FRISK/
REMOVAL OF HIGH RISK SUSPECTS FROM VEHICLE** **3**

COMMANDS

DROP THE WEAPON! ¡SUELTE EL ARMA!
DROP THE GUN! ¡SUELTE LA PISTOLA!
DROP THE KNIFE! ¡SUELTE LA NAVAJA!
DROP IT! ¡SUELTELA(O)!
HANDS BEHIND YOUR HEAD MANOS ATRÁS DE SU CABEZA
HURRY UP APURESE
SPEAK SLOWER HABLE MÁS DESPACIO
REPEAT PLEASE REPITA, POR FAVOR
LISTEN TO ME ESCÚCHEME
DO IT HÁGALO
COME WITH ME VENGA CONMIGO
STAY THERE QUEDESE ALLA
SIT DOWN SIÉNTESE
STAND UP OR STOP PARESE
QUICKLY PRONTO
LET'S GO VÁMONOS
DON'T TALK NO HABLE
FOLLOW ME SÍGAME
COME HERE VENGA AQUÍ
GO OVER THERE VAYA ALLÁ
GO AWAY VÁYASE
STAY OUTSIDE QUÉDESE AFUERA
TELL ME QUICKLY DÍGAME PRONTO
TELL ME THE TRUTH DÍGAME LA VERDAD
GIVE ME THE INFORMATION DÉME LA INFORMACION

COMMANDS

DROP THE WEAPON! ¡SUELTE EL ARMA!
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TELL ME QUICKLY DÍGAME PRONTO
TELL ME THE TRUTH DÍGAME LA VERDAD
GIVE ME THE INFORMATION DÉME LA INFORMACION

GIVE ME YOUR LICENSE DÉME SU LICENCIA
 SIGN YOUR NAME HERE FIRME SU NOMBRE AQUÍ
 WHERE ARE THE KEYS? ¿DÓNDE ESTAN LAS LLAVES?
 FIRE FUEGO
 GET OUT OF THE HOUSE/APT. SALGASE DE LA
 CASA/PARTAMENTO

THE PREDOMINANT COLORS

BLACK NEGRO (NEGRA)
 BLUE AZUL
 BROWN CAFE
 (COMPLEXION MORENO)
 HAZEL/LT. BROWN CASTAÑO (EYES/HAIR)
 GREEN VERDE
 GREY GRIS
 ORANGE NARANJA/(ANARANUADO,
 (ANARANUADA)
 PINK ROSA
 RED ROJO (ROJA), COLORADO
 (COLORADA)
 WHITE BLANCO (BLANCA)
 YELLOW AMARILLO (AMARILLA)
 LIGHT COLOR/CLEAR CLARO (CLARA)
 DARK COLOR/OBSCURE OSCURO

NOTES

COMMANDS/COLORS

GIVE ME YOUR LICENSE DÉME SU LICENCIA
 SIGN YOUR NAME HERE FIRME SU NOMBRE AQUÍ
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THE PREDOMINANT COLORS

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 (COLORADA)
 WHITE BLANCO (BLANCA)
 YELLOW AMARILLO (AMARILLA)
 LIGHT COLOR/CLEAR CLARO (CLARA)
 DARK COLOR/OBSCURE OSCURO

NOTES

COMMANDS/COLORS

MEDICAL AID TERMS

1. ARE YOU INJURED?
¿ESTÁ HERIDO?
2. DOES YOUR CHEST HURT? (THE) STOMACH?
(THE) HEAD?
¿LE DUELE EL PECHO? ¿(EL) ESTÓMAGO?
¿(LA) CABEZA?
3. WHERE DOES IT HURT? SHOW ME!
¿DÓNDE LE DUELE? ¡ENSEÑEME!
4. YOU'RE INJURED, PLEASE DON'T MOVE.
¿ESTÁ HERIDO, POR FAVOR NO SE MUEVA!
5. ARE YOU ILL?
¿ESTÁ ENFERMO?
6. ARE YOU DIABETIC?
¿ES USTED DIABÉTICO?
7. ARE YOU AN EPILEPTIC?
¿ES USTED EPILÉPTICO?
8. DO YOU HAVE HEART TROUBLE?
¿SUFRE DEL CORAZÓN?
9. HOW DO YOU FEEL?
¿CÓMO SE SIENTE?
10. ARE YOU TAKING MEDICATION?
¿ESTÁ USTED TOMANDO ALGUNA MEDICINA?
11. WHERE IS YOUR MEDICINE?
¿DÓNDE ESTA SU MEDICINA?
12. YOU NEED MEDICAL HELP.
USTED NECESITA AYUDA MÉDICA.
13. DO YOU WANT A DOCTOR?
¿QUIERE USTED UN MÉDICO?
14. DO YOU WANT AN AMBULANCE?
¿QUIERE USTED UNA AMBULANCIA?

MEDICAL AID TERMS

1. ARE YOU INJURED?
¿ESTÁ HERIDO?
2. DOES YOUR CHEST HURT? (THE) STOMACH?
(THE) HEAD?
¿LE DUELE EL PECHO? ¿(EL) ESTÓMAGO?
¿(LA) CABEZA?
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¿ESTÁ HERIDO, POR FAVOR NO SE MUEVA!
5. ARE YOU ILL?
¿ESTÁ ENFERMO?
6. ARE YOU DIABETIC?
¿ES USTED DIABÉTICO?
7. ARE YOU AN EPILEPTIC?
¿ES USTED EPILÉPTICO?
8. DO YOU HAVE HEART TROUBLE?
¿SUFRE DEL CORAZÓN?
9. HOW DO YOU FEEL?
¿CÓMO SE SIENTE?
10. ARE YOU TAKING MEDICATION?
¿ESTÁ USTED TOMANDO ALGUNA MEDICINA?
11. WHERE IS YOUR MEDICINE?
¿DÓNDE ESTA SU MEDICINA?
12. YOU NEED MEDICAL HELP.
USTED NECESITA AYUDA MÉDICA.
13. DO YOU WANT A DOCTOR?
¿QUIERE USTED UN MÉDICO?
14. DO YOU WANT AN AMBULANCE?
¿QUIERE USTED UNA AMBULANCIA?

15. YOU SHOULD SEE A DOCTOR.
USTED DEBE VER A UN MÉDICO.
16. DO YOU WANT TO GO TO THE HOSPITAL?
¿QUIERE USTED IR AL HOSPITAL?
17. YOU HAVE TO GO TO THE HOSPITAL.
USTED TIENE QUE IR AL HOSPITAL.

ANATOMY

1. (THE) ARM (EL) BRAZO
2. (THE) BACK (LA) ESPALDA
3. (THE) BODY (EL) CUERPO
4. (THE) BLOOD (LA) SANGRE
5. (THE) CHEST (EL) PECHO
6. (THE) EAR (EL) OIDO/LA OREJA
7. (THE) EYES (LOS) OJOS
8. (THE) FACE (LA) CARA
9. (THE) FINGERS (LOS) DEDOS
10. (THE) FOOT (EL) PIE
11. (THE) FOREHEAD (LA) FRENTE
12. (THE) HAND (LA) MANO
13. (THE) HEAD (LA) CABEZA
14. (THE) KNEE (LA) RODILLA
15. (THE) LEG..... (LA) PIERNA
16. (THE) MOUTH (LA) BOCA
17. (THE) NOSE (LA) NARIZ
18. (THE) STOMACH (EL) ESTOMAGO
19. (THE) THROAT (LA) GARGANTA
20. (THE) WAIST (LA) CINTURA

MEDICAL AID TERMS/ANATOMY

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15. YOU SHOULD SEE A DOCTOR.
USTED DEBE VER A UN MÉDICO.
16. DO YOU WANT TO GO TO THE HOSPITAL?
¿QUIERE USTED IR AL HOSPITAL?
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MEDICAL AID TERMS/ANATOMY

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HIGH RISK KNEELLING
FRISK

STOP
ALTO

PUT YOUR HANDS UP/SPREAD YOUR FINGERS.
MANOS ARRIBA-MAS ABRA SUS DEDOS.

SLOWLY TURN AROUND, STOP.
DESPACIO VOLTEESE, ALTO.

SLOWLY COME DOWN TO YOUR KNEES.
DESPACIO, BAJESE A SUS RODILLAS.

PUT YOUR HANDS BEHIND YOUR HEAD.
PONGA SUS MANOS, ATRAS DE SU CABEZA.

CROSS YOUR FINGERS.
CRUCE SUS DEDOS.

CROSS YOUR FEET/LEGS.
CRUCE SUS PIES/PIERNAS.

DON'T MOVE.
NO SE MUEVA.

DON'T TALK.
NO HABLE.

HIGH RISK KNEELLING
FRISK

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ALTO

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CRUCE SUS PIES/PIERNAS.

DON'T MOVE.
NO SE MUEVA.

DON'T TALK.
NO HABLE.

FIELD INTERVIEW/CITATION/PERSONAL DATA

1. YOUR LICENSE PLEASE.
SU LICENCIA POR FAVOR.

2. DO YOU HAVE IDENTIFICATION?
¿TIENE IDENTIFICACION?

3. WHAT IS YOUR NAME?
¿CÓMO SE LLAMA USTED?

4. WHAT IS YOUR LAST NAME?
¿CUÁL ES SU APELLIDO?

5. WHAT IS YOUR FIRST NAME?
¿CUÁL ES SU PRIMER NOMBRE?

FIELD INTERVIEW/CITATION/PERSONAL DATA

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4. WHAT IS YOUR LAST NAME?
¿CUÁL ES SU APELLIDO?

5. WHAT IS YOUR FIRST NAME?
¿CUÁL ES SU PRIMER NOMBRE?

6. WHAT IS YOUR FATHER'S NAME?
CÓMO SE LLAMA SU PAPA?
7. WHAT IS YOUR ADDRESS?
¿CUAL ES SU DOMICILIO? (DIRECCIÓN)
8. HOW TALL ARE YOU?
¿CUÁNTO MIDE USTED?
9. HOW MUCH DO YOU WEIGH?
¿CUÁNTO PESA USTED?
10. WHAT IS YOUR DATE OF BIRTH? HOW OLD ARE YOU?
¿CUAL ES SU FECHA DE NACIMIENTO? CUANTOS
AÑOS TIENE?
11. WHAT IS YOUR PHONE NUMBER WITH AREA CODE?
(HOME) (WORK)
¿CUAL ES SU NÚMERO DE TELEFONO CON AREA?
(DE CASA) (DE TRABAJO)
12. WHERE DO YOU WORK?
¿DÓNDE TRABAJA USTED?
13. WHAT IS YOUR ADDRESS AT WORK?
¿CUAL ES LA DIRECCION DE SU TRABAJO?
14. WHAT IS YOUR SOCIAL SECURITY NUMBER?
¿CUAL ES SU NUMERO DE SEGURO SOCIAL?
15. DO YOU HAVE A NICKNAME? (another name)
¿TIENE USTED SOBRE NOMBRE?(otro nombre?)
16. DO YOU BELONG TO A GANG? WHICH ONE?
¿PERTENECE USTED A UNA PANDILLA/GANGA? ¿CUAL?
17. WHAT IS YOUR MOTHER'S NAME?
¿CÓMO SE LLAMA SU MAMÁ? (FOR SUBJECT)
18. WHICH SCHOOL DO YOU GO TO? WHERE IS THE
SCHOOL LOCATED?
¿CUAL ESCUELA VAS? ¿DÓNDE ESTÁ LA ESCUELA?
19. WHERE WERE YOU BORN?
¿DÓNDE NACIÓ USTED?

**HIGH RISK KNEELING FRISK/
FI/PERSONAL DATA**

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CÓMO SE LLAMA SU PAPA?
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**HIGH RISK KNEELING FRISK/
FI/PERSONAL DATA**

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DESK GUIDE
COMMON SENTENCES

IS IT AN EMERGENCY? ¿ES UNA EMERGENCIA?
DO YOU NEED HELP? ¿NECESITA AYUDA?
WAS THERE A WRECK? ¿HUBO UN CHOQUE?
WAS SOMEONE RUN OVER? ¿HUBO UN ATROPELLADO?
SON/DAUGHTER RAN AWAY HIJO/JUJA JUYÓ DE LA CASA
DO YOU NEED THE POLICE? ... ¿NECESITA LA POLICIA?
DO YOU NEED THE FIRE DEPT.? ¿NECESITA A LOS BOMBERO?
WAS THERE A BURGLARY? ... ¿HUBO ROBO DE CASA?
DID THEY ROB YOU? ¿LE ROBARON A USTED?
DID THEY STEAL YOUR CAR? ¿LE ROBARON SU CARRO?
WHAT IS THE LIC PLATE NUMBER TO YOUR CAR?
..... ¿CUALES SON LOS NUMEROS DE SUS PLACAS?
DRIVE BY SHOOTING BALACEARON DESDE EL
CARRO (HUBO TIROTEO)
ARE THERE ANY WEAPONS?
..... ¿HAY ARMAS/TIENE ARMAS?
WHERE DO YOU LIVE? ¿DÓNDE VIVE USTED?
WHERE DID IT OCCUR? ¿DÓNDE OCURRIÓ?
DO YOU SPEAK ENGLISH? ¿HABLA INGLÉS
PLEASE CALM DOWN POR FAVOR CALMESE
GOOD BY ADIOS
CAR INSURANCE SEGURO DE CARRO

DESK GUIDE
COMMON SENTENCES

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