

UNIVERSITY OF MASSACHUSETTS DARTMOUTH POLICE DEPARTMENT

POLICE REPORT REQUEST

Date:				
Requestor name: _	Na	Name of person on report:		
Home address:				
Email address:	Ma	ain phone num	mber:	
* The police report number (if available):				
Date and description	n of incident:			
Does the incident inv	olve a juvenile? (not yet reach	ed the age of 18	8)No	
YOU MAY DROP THE		POLICE DISP.	AILED TO: <u>LREDDICK@UMASSD.EDU</u> or ATCH FOR FOWARDING TO RECORDS. estigation. M.G.L.c4s7(26)(f)(1992ed)	
· ·	Public Records Law Exemption If release is denied, you will be	,	may not affect the release of the he reason.	
Exemption A - Statutory Exemption exempted from disclosure by statute		m disclosure those a	locuments which are: specifically or by necessary implication	
	ny other materials or data relating to a s		of the exemption limits its application to: personnel & dividual, the disclosure of which may constitute an	
view by law enforcement or other in	vestigatory officials the disclosure of wh	ich materials would	investigatory materials necessarily compiled out of the public probably so prejudice the possibility of effect law interest Avoidance of premature disclosure of the	
	OFFICE	USE ONLY		
TO BE COMPLETED	IF REQUEST NEEDS APPROV	AL:		
Chief of Police	Record Request Approved		Record Request Denied	
Chief of Police Signatu	ıre:			
Was requestor provide	d with a copy of report(s): Yes_	No	_	
If not provided with a ha	ard copy, was the requestor permi	tted to view a co	opy of the report(s) while at the station?	
Yes	_ No			
Date report(s) were prov	vided to requestor:	Prov	vided by:	