

### Recommended C.I.T. Data Collection Fields

- Date:
- Precinct: 1 2 3 4 5
- Officers Involved:
- CNN:
- Incident Location Address:
- How Call Received:
  - Call Code:
- Time Spent on Call:
- Name of Subject(s) involved:
  - Age:
  - DOB:
  - Race:
  - Ethnicity:
  - Housing Status:
  - Employment:
- Admitted Mental Illness:
- Behavior Displayed:
- Force Used:
- Injuries Sustained:
- Disposition:
  - Explanation of Disposition:
- Follow-up Recommended: YES NO
  - Explanation:
- Additional Notes:
- Form Reviewed By: