



South Carolina Department of Public Safety

AUDIO/VIDEO MONITOR REPORT

TO: Col., Lt. Colonel, Major, or Capt.
FROM: (Reviewing Officer)
DATE: / / (Date of Report)

I have reviewed a portion of the following video tapes.

Date Reviewed	Trooper Assigned	Tape Date or Number	Total Minutes Reviewed	FINDINGS		Action Taken 1, 2, 3*
				Policy Violation A, B, or C*	Procedure Violation A, B, or C*	
Remarks:						

- A – No noted violation
- B – Minor violation
- C – Serious violation
- 1 – Handled within County or District
- 2 – Referred to District Headquarters for review
- 3 – Referred to Patrol Headquarters for review

In accordance with SCDPS Policy 300.06 (Audio/Video Recordings), I have reviewed the selected portion(s) of this recording(s) to evaluate the officer's (1) compliance with standard operating procedures, safety procedures, and other training; (2) interactions with the public; and (3) professional behavior and demeanor. Appropriate action has been taken to address any issues that arose as a result of this review.

Date:	Supervisor's Signature:
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