

Report Evaluation Cover Sheet

Probationer: _____ Date: ____/____/____ DOR#

Type of Report:

- Mirror Report of Complaint/Report # _____
- Criminal Offense - Type: _____
- General Information - Type: _____
- Role Play Scenario - Type: _____
- State Crash - Personal Injury: _____
- State Crash - Property Damage: _____

	Yes	No	Not Applicable
1) Report is clear and concisely written	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Report is complete/organized for the facts/information and criminal elements are complete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Sentence structure/syntax spelling acceptable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Report completed in an acceptable time frame.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Time to complete:

Number of drafts:

(Attach all drafts to DOR)