

ALBANY POLICE DEPARTMENT

VICTIM ASSISTANCE

2600 Pacific Boulevard SW, Albany OR 97321 Tara.Williams@cityofalbany.net 541-791-0103

Victim Assistance Questionnaire

The City of Albany Police Victim Assistance Specialist program strives to provide the highest quality services and is committed to assisting the crime victims in our community. We thank you for your cooperation and participation in the victim services program. Your involvement is crucial to holding the defendant accountable as well as promoting individual and community safety.

We are always seeking to improve our services and would appreciate your input regarding how our agency treated you. At the conclusion of the criminal case in which you were a victim, please take a few moments to complete the evaluation below. By answering these questions and giving us ideas about how to improve our program and services, you can help the City of Albany Police Victim Assistance program better serve crime victims in the future.

Please, tell us how much you agree or disagree with the following statements:

1) The Victim Assistance Specialist answered your questions pertaining to your rights as a victim?		
00000	Strongly Disagree Disagree Undecided Agree Strongly Agree	
2) T	he Victim Assistance Specialist is a valuable service to the City of Albany community	
00000	Strongly Disagree Disagree Undecided Agree Strongly Agree	
3) 1	was treated with respect by the Victim Assistance Specialist	
00000	Strongly Disagree Disagree Undecided Agree Strongly Agree	

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4) The Victim Assistance Specialist was courteous and professional.		
C Strongly Disagree		
Disagree		
Undecided		
Agree		
Strongly Agree		
5) Overall, how satisfied were you with your contact with the Victim Assistance Specialist?		
Not Satisfied		
Somewhat Satisfie	d	
Very Satisfied		
6) Were you provided documents: Victim Impact Statement and Restitution Information Form by the Victim Specialist		
C Yes		
O No		
7) What changes, if any, can we make to improve our victim services program?		

• Please either mail, email or personally deliver this completed questionnaire to the Albany Police Department in care of: Tara Williams/Victim Resource Specialist.