

	Very Concerned	Somewhat Concerned	Not Too Concerned	Not At All Concerned	Don't Know/ No Opinion
Drug sales	1	2	3	4	5
Gangs	1	2	3	4	5
Illegal possession of firearms	1	2	3	4	5
Public drunkenness	1	2	3	4	5
Alcohol sales to youth	1	2	3	4	5
Prostitution	1	2	3	4	5
Transients	1	2	3	4	5
Someone stealing from your home	1	2	3	4	5
Getting mugged	1	2	3	4	5
Identity theft	1	2	3	4	5
Being assaulted	1	2	3	4	5
Auto theft	1	2	3	4	5
Having things stolen from your car	1	2	3	4	5
Hate crimes	1	2	3	4	5
Graffiti	1	2	3	4	5
Traffic accidents	1	2	3	4	5
Speeding vehicles	1	2	3	4	5
Vehicles running red lights	1	2	3	4	5
Noisy parties	1	2	3	4	5
Other noise disturbances	1	2	3	4	5
Bullying in schools	1	2	3	4	5
Abandoned cars	1	2	3	4	5
Condition of neighbors' residences	1	2	3	4	5
Other (Specify)	1	2	3	4	5
Other (Specify)	1	2	3	4	5

6. Were you, or anyone in your household, the victim of a crime during the past 12 months? (Please circle one)

1 Yes 2 No (Skip to question 7)

6a. How many times were you, or anyone in your household, a victim of a crime (during the past 12 months)? _____

6b. Did any of these crimes occur in Lakeside?
1 Yes 2 No (Skip to question 7)

6c. What crime or crimes occurred in Lakeside?
(Please Describe) _____

6d. Did you report these crimes to the Sheriff's Department?
1 Yes (Skip to question 7) 2 No 3 Reported one/some, but not all

6e. If you did not report all of the crime(s) to the Sheriff, why not?
(Please explain) _____

7. Do you have access to the Internet at any of the following? (Please circle all that apply)

1 Home 3 School 5 Don't have access to the Internet (Skip to question 9)
2 Work 4 Other (Specify) _____

11. Have you heard about and/or used the following Sheriff's Department programs?

(Please circle the number under your response)

	Have Used Program	Heard of Program But Never Used It	Never Heard Of Program
Youth Services			
Community Activities League	1	2	3
Shop-With-A-Cop Program	1	2	3
School Safety Patrol Program	1	2	3
Juvenile Offender Diversion Program	1	2	3
Kidzwatch	1	2	3

	Have Used Program	Heard of Program But Never Used It	Never Heard Of Program
Community Programs			
Reserve Deputies	1	2	3
Senior Volunteers	1	2	3
Crime Free Multi-Housing	1	2	3
Citizens Academy	1	2	3
Neighborhood Watch	1	2	3
Business Watch	1	2	3
CPTED	1	2	3

12. In general, how satisfied are you with the services of the Sheriff's Department? *(Please circle one)*

1 Very Satisfied 2 Satisfied 3 Not Too Satisfied 4 Not at All Satisfied 5 No Opinion

12a. If not too satisfied or not at all satisfied, please explain:

13. Do you have any suggestions for how the Sheriff's Department could better serve you? *(Please describe)*

PLEASE NOTE: The following questions are asked to help us obtain a general profile of the residents surveyed. All answers are strictly anonymous and confidential and will be used for research purposes only.

1. What is your age?

- 1 18 to 24
- 2 25 to 34
- 3 35 to 44
- 4 45 to 54
- 5 55 or older

2. Are you:

- 1 Female
- 2 Male

3. What is your ethnic background? (Please circle one)

- 1 Hispanic
- 2 Black
- 3 White
- 4 Asian / Pacific Islander
- 5 Other or Mixed (*Specify*) _____

4. What is the highest level of education you have completed?

- 1 Less than high school
- 2 High school diploma / G.E.D. certificate
- 3 Vocational / training school certificate
- 4 Some college
- 5 College degree

5. Do you own or rent the home you live in?

- 1 Own
- 2 Rent

6 How many people live in your household?

- 1 One
- 2 Two
- 3 Three or four
- 4 Five or more

7. How long have you lived in your current neighborhood?

- 1 Less than 1 year
- 2 1 to 3 years
- 3 4 to 6 years
- 4 7 to 9 years
- 5 10 years or more

8. What language is spoken most of the time in your home?

(Please circle one)

- 1 English
- 2 Spanish
- 3 Other language (*Specify*) _____

9. What was your total annual household income in 2002?

- 1 Under \$20,000
- 2 \$20,000 to \$34,999
- 3 \$35,000 to \$49,999
- 4 \$50,000 to \$74,999
- 5 \$75,000 or greater