Crime Prevention Survey Request Form

New York State University Police at Stony Brook University

Instructions: Please fill out this survey request form and email it to Douglas.Little@sunysb.edu or print and mail the form.

Name:	**Date:**
Email:	**Phone:**
Department:	**Campus Zip:**

Service you are requesting: ☐ **Survey** ☐ **Alarm System (includes a survey)**

Description of service requested:

Print Form

Email Form

Mail to: University Police
c/o Douglas Little
175 Dutchess Hall
Stony Brook, NY 11794