

**Florida Department of Corrections**

**Non-Compliant Use of Force/Warden Disposition Report**

Use of Force Number: \_\_\_\_\_

- The employee has been formally referred to the employee relations section, for formal corrective action due to the non-compliant use of force.

Employee(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- Action Taken at Institutional Level:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Warden Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Institution: \_\_\_\_\_

**A copy shall be distributed to the following:**

Employee Relations Supervisor  
Assistant Deputy Secretary of Institutions  
Regional Director  
Warden  
Use of Force Unit - Office of the Inspector General