

**State of Florida
Department of Corrections**

Disapproved Use of Force/Warden-Disposition Report

Use of Force Number: _____

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

Employee(s): _____

- Action Taken At Institutional Level:

Warden Signature: _____ Date: _____

Institution: _____

Distribution List:

White: Service Center, Employee Relations Supervisor
Pink: Director of Institutions
Yellow: Regional Director
Green: Warden
Goldenrod: Use of Force Unit- Office of the Inspector General