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| logo IBJ | Eyewitness Identification Checklist |

**OPPORTUNITY TO OBSERVE**

1. **Distances**
2. **Lighting**
   1. Nearest light sources
   2. Cast shadows? Where? Over what? What length?
3. **Activities witness was doing while observing**
   1. How many seconds observed in each position
      1. position of witness
      2. position of suspect
      3. portion of suspect visible to witness
   2. Distance separating witness from suspect at each position
   3. Obstruction of view
      1. People
      2. Fixed objects
      3. Movement by people / suspect
   4. Disguises
      1. Type
      2. Cover what party of body
      3. Ever repositioned? How?
4. **Impediments to vision or ability to observe**
   1. Glasses? Near sighted / far sighted?
   2. Hearing aid?
   3. Intoxication
      1. Drugs
      2. Alcohol
      3. Both
      4. How much
   4. Taking medication
      1. What
      2. Doses
      3. Why prescribed
      4. When
      5. Who prescribed
      6. Conscious of its effect
      7. How
   5. Feeling well at the time
      1. Nauseated
      2. Blurred vision
      3. Crying
      4. Migraines
      5. Double images
      6. Hallucinating
         1. Reaction to drugs
         2. Reaction to fever
      7. Ringing in ears
      8. Concussion
   6. Emotional factors
      1. Startled
      2. Shocked
      3. Frightened
      4. Palpitating
      5. Heart flutter
      6. Nervous
      7. Level
      8. Gun pointed/weapon focus
   7. Distractions
      1. Trying to recall other details
         1. License plate (repeating, writing down)
         2. Appearance of other people
      2. Trying not to see too much to avoid harm
      3. Trying to assist someone
         1. First aid
         2. Escape
      4. Trying to escape
      5. Trying to hide valuables
      6. Doing something else at time of incident.

**WHAT ACTUALLY WAS OBSERVED**

1. **Suspect in General**
   1. Age
   2. Height
   3. Weight
   4. Build
   5. Race-nationality
      1. Specific Appearance
      2. Accent
   6. Mannerism
      1. Stutter
      2. Repeat Unusual Words or Phrases
      3. Other
   7. Physical handicaps
   8. Clothing-detailed description of every item.
   9. Suspect appeared intoxicated (symptoms / extent)
2. **Suspect Head**
   1. Hair
   2. Color
   3. Length
   4. Manner in which combed
   5. Texture (fine or course)
   6. Straight, curly or wavy
   7. Thick, bald
   8. Describe hairline. Receding?
   9. Sideburns (length or shape)
   10. Apparel on head (hat, beanie, bandana)
3. **Suspect Face**
   1. Shape: round or oblong
   2. Presence of scars, acne, moles, pimples, tattoos, piercing
   3. Mustache
   4. Beard
   5. Glasses
   6. Describe forehead (wrinkles, high, low)
   7. Eyebrows, large, bushy, thin, continuous, color?
   8. Eyes (color, size)
   9. Ears (size, shape, earrings, lobes)
   10. Nose (size shape, earrings, scars)
   11. Mouth (size, shape, lips, teeth missing, gold teeth, color of teeth, lipstick)
   12. Skin (light, tan, sallow)
   13. Presence or absence of makeup
   14. Dimpled skin
   15. Jutting Jaw
4. **Suspect Arms and Hands**
   1. Tattoos, scars, marks
   2. Gloves, color type
   3. Jewelry, watches, rings
   4. Arms (muscular, thin, same or different size)
   5. Hands (large, small, calloused, muscular?)
   6. Fingernails (length, chewed, polished?)
   7. Arm hair (color?)
   8. In which hand was object(s), switch?
   9. Which hand used to make motions to others?
5. **Suspect legs and feet**
   1. Bow-legged or knock-kneed?
   2. Size of legs and feet
   3. Pigeon toed
   4. Presence of marks, tattoos, on legs and feet
   5. Hairy legs?
   6. Walks with a limp, stagger, run or stumble?
   7. Leave area on foot
   8. Type of footwear
6. **Suspect Torso**
   1. Long-waisted
   2. Distinctive
7. **Other distinguishing features of Suspect**
8. **Any Weapon Held**
   1. Detailed description
   2. How much seen, time, distance
   3. Condition (old, rusty)
   4. Training in identifying weapons
   5. Personal experience
      1. Own, more than one?
      2. Fire one, Often? Recently?
9. **Vehicle Present**
   1. Detailed description
   2. Make
   3. Model
   4. Year
   5. Color
   6. Primer spots
   7. Vinyl roof
   8. Number of doors
   9. Accessories
      1. Luggage rack
      2. Mag wheels
      3. White walls
   10. License number
       1. How remembered
       2. Wrote it down color of license plate/state from
   11. Bumper stickers
   12. Damage
   13. Objects hanging from vehicle

**SUBSEQUENT IDENTIFICATION**

1. **In field, ID, photographic ID, lineup?**
   1. Where
   2. When
   3. What Circumstances
   4. Who conducted
   5. What was said before / admonishment
   6. How many photos or people shown
   7. Conversations
   8. Other people present
   9. Taped recordings of ID
   10. Writings of ID
   11. How long it to for witness to make ID
   12. Exact Words of Witness re ID
   13. Length of Time Viewed Photos / Person (s)
   14. Did Witness Inquire with Police if got it right and what did police say?