



INTERNAL COMPLAINT FORM

My name is \_\_\_\_\_

I live at \_\_\_\_\_

My home phone is \_\_\_\_\_ or my work phone is \_\_\_\_\_

where I can be reached from \_\_\_\_\_ (CIRCLE ONE) A.M./P.M. to \_\_\_\_\_ (CIRCLE ONE) A.M./P.M. Ext. # \_\_\_\_\_

My age is \_\_\_\_\_ years.

I want to complain about (car number) \_\_\_\_\_

(badge #) \_\_\_\_\_

(Officer) \_\_\_\_\_

I want to complain because on (date) \_\_\_\_\_ At (time) \_\_\_\_\_ (CIRCLE ONE) A.M./P.M.

At (location) \_\_\_\_\_

They / he / she \_\_\_\_\_

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

(Attach as many additional sheets as necessary)

I understand, and it is my desire, that this complaint will be investigated diligently. I further understand that if the investigation proves these allegations to be false, I may be liable to both criminal and civil prosecution. I also understand that in some cases, I may be asked to submit to a polygraph examination as a part of this investigation.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF PARENT OR GUARDIAN  
(IF YOUR ARE UNDER 18 YEARS OF AGE)

