



**Wolfforth Police Department
 Commendation / Complaint Form
 302 Main St.
 Wolfforth, Tx. 79382**

Office Use Only: IA # : _____ Initials : _____
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Instructions: If you would like to praise a Wolfforth Police Department employee, or file a complaint against an employee, please fill out this form. Personal information will not be disclosed to the public, unless required by law. You can submit this form by mailing or returning it to the Wolfforth Police Department.

Mail to: Wolfforth Police P.O. Box 36 Wolfforth, Tx. 79382

I wish to file a (please check one): **Commendation** **Complaint**

If you are filing a complaint, indicate the type of complaint you wish to file (you must check one):

Formal Complaint: Involves serious allegation(s) of misconduct and I want my complaint officially investigated for which discipline may be imposed if the allegation(s) are sustained.

Informal Complaint: Involves a minor complaint or concern and I only want my complaint/concerns on record. I understand it will be for informational purposes only and will not be formally investigated. The matter will be discussed with the employee(s) involved.

Information about you

Last Name	First Name	MI	Date of Birth / /
Street Address & Apt #	City	State	Zip Code
Home Phone ()	Work Phone ()	Cell Phone ()	Email Address

Witness Information

Last Name	First Name	MI	Date of Birth / /
Street Address & Apt #	City	State	Zip Code
Home Phone ()	Work Phone ()	Cell Phone ()	Email Address

Information about the Incident

Location or Address of Incident	Date of Incident / /	Time of Incident AM / PM
Other Witness in the Area <input type="checkbox"/> Yes <input type="checkbox"/> NO	Officer Name or ID #	Vehicle Unit #

Nature of Action: Check all that apply and briefly describe what happened on the next page.

<input type="checkbox"/> Extremely Helpful	<input type="checkbox"/> Excessive / Improper Use of Force	<input type="checkbox"/> Rudeness, discourtesy and offensive language
<input type="checkbox"/> Very Caring/ Empathetic	<input type="checkbox"/> False Arrest	<input type="checkbox"/> Violation of civil rights
<input type="checkbox"/> Professional Conduct	<input type="checkbox"/> Unlawful Search and or Seizure	<input type="checkbox"/> Bias- based profiling
<input type="checkbox"/> Did a great Job	<input type="checkbox"/> Dishonesty and Untruthfulness	<input type="checkbox"/> Department Procedures or tactics
<input type="checkbox"/> Made an Extra Effort	<input type="checkbox"/> Corruption	<input type="checkbox"/> Other

Initials _____

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Instructions: Use this page to describe what occurred. Attach additional sheets as necessary. Your signature is required at the bottom of the last page. Initial at the bottom of all other pages.

I attest that the above information and my statement is true and correct.

Signature: _____

Date: _____

[] A copy was given to the reporting party Receiving Officer's Signature and Badge# _____