

FRESNO STATE POLICE DEPARTMENT

CITIZEN COMPLAINT

It is part of the mission of the Fresno State Police Department to deliver quality service to our community in an effective, responsive, and professional manner. We welcome all comments from our community on the effectiveness of our services and the manner in which we deliver those services.

We value your comments and encourage members of our community to take the time to commend our officers and staff when they are particularly pleased with our service, as well as notify us when those services are anything less than completely professional and helpful in nature.

For minor complaints, we encourage you to speak directly with an employee's immediate supervisor.

For more serious complaints, or when for any reason you would prefer to write the complaint or have it documented, this "Citizen Complaint Form" may be utilized. You may mail or fax it to our Department or deliver it to any supervisory officer on duty. Submissions may also be anonymous.

The Department is committed to a fair, impartial review of all complaints regarding our procedures or the conduct of our employees. California Penal Code section 832.5 sets forth that all California law enforcement agencies shall develop a procedure to investigate complaints made by a member of the public against a peace officer. All complaints will be taken seriously and investigated thoroughly. Corrective action will be taken when warranted. State personnel law requires that the actual discipline remain confidential. Complainants will be notified in any situation that requires investigation beyond a period of thirty days. Employee misconduct by police department employees is defined as: the commission of a crime, the neglect of duty, a violation of the Department rules and regulations, operating policies and procedures and/or conduct which may tend to reflect unfavorably upon the employee or the Department.

If you wish to file a written complaint, please complete the form on the back of this page. You may attach additional sheets of paper if you wish. If you file this complaint in person, you may simply ask for the supervisor on duty. If you wish to mail the complaint or fax it, please utilize the following contact information:

> Fresno State Police Department Jennifer Curwick, Lieutenant 2311 E Barstow Ave Mail Stop PO14 Fresno, CA 93740-0014

> > Fax: 559.278.7788



FRESNO STATE POLICE DEPARTMENT

2311 E. Barstow Ave, M/S PO14 (559)278-8400 Fresno, CA 93740 (559)278-7788 (fax)

CITIZEN COMPLAINT FORM

	(COMPLAINANT	'INFORMA	ATION		
DATE OF THIS REPORT			DATE OF INCIDENT			
PLEASE PRINT FULL NAMI	ID or DRIVER'S LICENSE					
CITY	DATE	DATE OF BIRTH				
STATE	ZIP		EMAII			
CELL PHONE	НОМІ	HOME PHONE		CELL PHON	NE	
NAME(S) OF POLICE EMPL		ICE EMPLOYEI F KNOWN, OR GIV				
BADGE NUMBER	UNIFORMED YES		NO	NO VEHICLE NUMBER		
WITNESS #1 PLEASE PRINT	FULL NAME	WITNESS IN		ON DRIVER'S LICENSE		
CITY	7			OF BIRTH	AGE	
STATE	ZIP		EMAII	EMAIL		
CELL PHONE	HOMI	HOME PHONE		CELL PHON	NE	
WITNESS #2 PLEASE PRINT	FULL NAME		ID or I	DRIVER'S LICENSE		
CITY			DATE OF BIRTH		AGE	
	ZIP		EMAII		<u> </u>	
STATE						
STATE CELL PHONE	НОМІ	E PHONE	<u> </u>	CELL PHON	NE	

	CIDENT IN DETAIL:	STATEMENT OF INCIDE	IN I	
			Additional docu	uments or pages attached.
	COMPLAINANT SIGN	NATURE	Additional doct	
	COMPLAINANT SIGN	NATURE DEPARTMENT USE ONI		uments or pages attached. DATE
EIVED BY				
EIVED BY WARDED TO				
WARDED TO			DATE DATE	
WARDED TO ESTIGATED BY			DATE DATE DATE	
WARDED TO ESTIGATED BY			DATE DATE	
WARDED TO			DATE DATE DATE	
WARDED TO ESTIGATED BY		DEPARTMENT USE ONL	DATE DATE DATE	
WARDED TO ESTIGATED BY IEWED BY CHIEF OF PO	OLICE	DEPARTMENT USE ONI	DATE DATE DATE DATE DATE	DATE