COVENTRY POLICE DEPARTMENT

PERSONNEL COMPLAINT FORM

Please give this completed document to a Police Supervisor or send it to the Chief of Police at 1585 Main St. Coventry, CT 06238. It may also be dropped off at the department or emailed to mpalmer@coventryct.org

Date of Incident	Time of Incident	Date Reported	Time Reported
Location of Incident			
Complainant's Name			
Complainant's DOB		**Complainant's Home Phone#**	
Complainant's Cell Phone#		**Complainant's E-mail**	

Name of Person Assisting Complainant	Address	Telephone

Employee Complained about (if known): (Name or physical description, Badge #, Car #, etc.)

Witness Information (Name, D.O.B., Address, Telephone #, etc.)

Please provide answers to the following questions:	YES	NO	UNSURE
1. To your knowledge, was all or any part of the incident complained of video or audio taped by anyone?	☐	☐	☐
2. Are you afraid for your safety, or that of any other person, for any reason as a result of making this complaint?	☐	☐	☐
3. Has anyone threatened you or otherwise tried to intimidate you in an effort to prevent you from making this complaint?	☐	☐	☐
4. Are you able to read, write and speak the English Language?	☐	☐	☐
5. If your answer to Question #4 is "No" or "Unsure", have you been provided with adequate language assistance to help you understand and fill out this form?	☐	☐	☐

(If you answered "Yes" to questions #1, #2, or #3 above, please provide details below.)
Details of the Incident: Please provide a full description of the circumstances that prompted your complaint. Attach supporting documentation, as appropriate; including letters, e-mails, photographs, video or audio tapes, etc.

Description/details of incident (add additional pages as necessary)

Person Receiving the Complaint

Rank/Name/ ID Number	Date Received	Time Received

Signature of person receiving complaint	Complaint Control Number
Complaint forward to:	Date

Method of Contact (Circle):   Telephone   In-Person   Mail   E-Mail   Other

A copy of the complaint was given to the person filing this complaint   ☐ YES   ☐ NO

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