



Hermantown Police Department

Commendation / Complaint Form

5111 Maple Grove Road
Hermantown, MN 55811
www.hermantownmn.com

Office Use Only:
IA#: _____
Initials: _____
Date: _____

Instructions: If you would like to praise an Hermantown Police Department employee, or file a complaint against a police employee, please write legibly and 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 Hermantown Police Department at the address given at the top of this page.

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 a serious allegation 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, will not be formally investigated. However the matter will be discussed with the employee(s) involved.

Information about you

LAST NAME	FIRST NAME	M.I.	DATE OF BIRTH
STREET and APT #	CITY	STATE	ZIP
HOME PHONE	WORK PHONE	CELL PHONE	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female

Are you filing this on behalf of someone else? Yes No If yes, then complete this section.

WHAT IS HIS/HER LAST NAME?	FIRST NAME	AGE	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female
STREET and APT #	CITY	STATE	ZIP
WHAT IS HIS/HER RELATIONSHIP TO YOU?	HOME PHONE	WORK / CELL PHONE	

Information about the incident

LOCATION OR ADDRESS OF INCIDENT	DATE OF INCIDENT	TIME OF INCIDENT AM/PM
WITNESS LAST NAME	FIRST NAME	AGE <input type="checkbox"/> Male <input type="checkbox"/> Female
WITNESS ADDRESS	CITY	STATE PHONE
NAME OF ID# OF OFFICER OR EMPLOYEE	NAME OF ID# OF OFFICER OR EMPLOYEE	

Nature of action: Check all that apply and briefly describe what happened on a separate sheet of paper (date & sign it)

<input type="checkbox"/> Extremely helpful	<input type="checkbox"/> Excessive and/or improper use of force	<input type="checkbox"/> Rudeness, courtesy, 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

I attest that the above information and my statement is true and correct to the best of my recollection.

Signature:

Date:

The citizen has received a copy of this page and a *Commendation/Complaint Brochure*. _____

Employee's ID#



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Narrative
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Instructions: Briefly describe the incident.

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I attest that the above information and my statement is true and correct to the best of my recollection.

Signature:

Date:

