



California State University, Sacramento
Police Department
 6000 J Street
 MS 6092
 Sacramento, CA 95819
 Phone: (916) 278-6000 Fax: (916) 278-6889

Complaint Form

PERSON FILING COMPLAINT			
Name (Last, First, Middle):		Home Phone #:	Cell Phone #:
Address (Number, Street, City, State, Zip Code):		Email Address:	
Race:	Gender:	Date of Birth (MM/DD/YYYY):	Drivers License #:
INCIDENT			
Date of Incident:	Time of Incident:	Location of Incident:	Citation or Report #:
Department Employee Involved (Include Badge Number, Rank, and Description If Known):			
Witness Name:	Witness Address:		Witness Phone #:
LEGAL ADVISEMENT AND ACKNOWLEDGEMENT			
<p>Per the California Penal Code Section 148.6: YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A POLICE OFFICER FOR ANY IMPROPER POLICE CONDUCT. CALIFORNIA LAW REQUIRES THIS AGENCY TO HAVE A PROCEDURE TO INVESTIGATE CITIZENS' COMPLAINTS. YOU HAVE THE RIGHT TO A WRITTEN DESCRIPTION OF THIS PROCEDURE. THIS AGENCY MAY FIND, AFTER INVESTIGATION, THAT THERE IS NOT ENOUGH EVIDENCE TO WARRANT ACTION ON YOUR COMPLAINT. EVEN IF THAT IS THE CASE, YOU HAVE THE RIGHT TO MAKE THIS COMPLAINT AND HAVE IT INVESTIGATED IF YOU BELIEVE AN OFFICER BEHAVED IMPROPERLY. CITIZEN COMPLAINTS AND ANY REPORTS OR FINDINGS RELATED TO COMPLAINTS MUST BE RETAINED BY THIS AGENCY FOR AT LEAST FIVE YEARS.</p> <p>CALIFORNIA LAW REQUIRES LAW ENFORCEMENT AGENCIES TO INVESTIGATE COMPLAINTS AGAINST POLICE OFFICERS. (Pen. Code, Section 832.5(a)(1)). TO PREVENT INDIVIDUALS FROM MAKING FALSE COMPLAINTS AGAINST OFFICERS, THE LEGISLATURE ENACTED PENAL CODE SECTION 148.6, WHICH MAKES IT A MISDEMEANOR FOR ANYONE TO KNOWINGLY FILE A FALSE MISCONDUCT COMPLAINT AGAINST A PEACE OFFICE. SECTION 148.6 ALSO REQUIRES LAW ENFORCEMENT AGENCIES TO REQUIRE THOSE WHO WANT TO FILE COMPLAINTS AGAINST OFFICERS TO SIGN AN ADVISORY THAT WARNS THAT KNOWINGLY FILING A FALSE COMPLAINT MAY RESULT IN CRIMINAL PROSECUTION.</p> <p>Please sign and date this complaint form and return it to us so we can proceed with the investigation. You have the right to a copy of this completed form. I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT.</p>			
_____	_____		_____
Print Name	Signature		Date
DETAILS OF COMPLAINT			
<p>It is important to include as many factual details as possible so the incident may be fully investigated. Please use the reverse side of this form if necessary.</p>			

OFFICIAL USE ONLY

Method of Acceptance: In Person Mail Email

Date and Time Received:

Employee Receiving Complaint:

DETAILS OF COMPLAINT (Continued)

It is important to include as many factual details as possible so the incident may be thoroughly investigated. Please use an additional sheet if necessary.