CIVILIAN COMPLAINT FORM

Please give this completed document to a Police Supervisor or send it to the Chief of Police of UConn Police Department at the following address or email: Chief Hans Rhynhart, University of Connecticut Police Department, 126 North Eagleville Road, Storrs, CT 06269-3070 or Email: chiefofpolice@uconn.edu

<table>
<thead>
<tr>
<th>Date of Incident</th>
<th>Time of Incident</th>
<th>Date Reported</th>
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Location of Incident

Complainant’s Name

Complainant’s Address (Street, City, State, ZIP)

Complainant’s DOB

Complainant’s Home Phone#

Complainant’s Work Phone#

Complainant’s Cell Phone#

Complainant’s E-mail

Employer

Occupation

Employer’s Address

Employer’s Telephone

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:

1. To your knowledge, was all or any part of the incident complained of video or audio taped by anyone?  
   YES ☐ NO ☐ UNSURE ☐

2. Are you afraid for your safety, or that of any other person, for any reason as a result of making this complaint?  
   YES ☐ NO ☐ UNSURE ☐

3. Has anyone threatened you or otherwise tried to intimidate you in an effort to prevent you from making this complaint?  
   YES ☐ NO ☐ UNSURE ☐

4. Are you able to read, write and speak the English Language?  
   YES ☐ NO ☐ UNSURE ☐

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?  
   YES ☐ NO ☐ UNSURE ☐

(If you answered “Yes” to any of the above questions, please provide details below.)
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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.

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(Attach additional pages, if necessary)

I have read, or had read to me, the above and attached complaint and statement consisting of ____ pages. All of the answers are true and accurate to my knowledge. I understand that making a false statement intended to mislead a law enforcement officer in his official function is a violation of Connecticut General Statute 53a-157b and could result in my arrest and being fined and/or imprisoned.

Complainant’s Signature

Date and Time Signed

On this the _____ day of _______________, _________, before me the undersigned officer, personally appeared the complainant whose name is subscribed above and acknowledged that he/she truthfully executed this instrument for the purposes herein contained.

Notary (For Authority See C.G.S. §§1-24, 3-94a et seq.)

Print Rank/Name/ID Number:

Person Receiving Complaint

Name/Rank/Badge #

Date Received

Time Received

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

Signature of person receiving complaint

Complaint Control Number