

# Lewis University Police Department

## Complaint Form



Please take a moment to complete the following information, which will be needed in reviewing the facts surrounding your complaint. Please include as much detail as possible. PLEASE PRINT EXCEPT FOR SIGNATURE

NAME: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_  
(first, middle, last)

ADDRESS: \_\_\_\_\_ HOME PHONE: ( ) \_\_\_\_\_  
(number, street, apartment, city, state, zip code) WORK PHONE: ( ) \_\_\_\_\_

MY COMPLAINT IS ABOUT:  
OFFICER / EMPLOYEE(s): \_\_\_\_\_

BADGE NUMBER(s): \_\_\_\_\_

INCIDENT REPORT NUMBER(s): \_\_\_\_\_

I wish to make a formal complaint regarding the conduct or actions of the above officer/employee(s) as a result of the following incident(s):

I understand that this statement of complaint will be submitted to the Lewis University Police Department and will serve as the basis for an internal investigation. I affirm that the facts contained herein are complete, accurate, and true to the best of my knowledge and belief. Furthermore, I agree to fully cooperate with any investigation and agree to appear at any civil or criminal proceeding if necessary.

DATE: \_\_\_\_\_ SIGNATURE OF COMPLAINANT \_\_\_\_\_