

Report of Commendation

The University of Minnesota Duluth Police Department is committed to maintaining integrity, discipline, and a relationship with the community of trust and confidence. We welcome citizen's recognition of police employees performing in an effective, quality manner. If you have had a positive experience involving one of our employees and you believe the employee should be recognized for their performance, please take the time to fill out the form below.

Please complete this form as fully and accurately as you are able. When describing the incident, write down a detailed account as you remember it. Whenever possible, include the location, date, time, and telephone number, and the names and addresses of other known witnesses. If known, give the name(s) of the officer(s) involved. If you do not know the officer's name(s), use the narrative section to describe the officer(s) in as much detail as you can remember. If necessary, attach additional sheets to this form. It's also important that you include as much as you remember of any conversation you or others had with the officer(s) or any actions taken by the officer(s). Describe in detail what you feel the officer(s) or any police department employee did that should be recognized.

Citizen commendations will be forwarded to the Chief, the employee's supervisor, the commended employee and to their personnel file.

Thank you for taking the time to recognize the hard work and dedication of our employees.

University of Minnesota Duluth Police Department

<u>Name :</u>	<u>Home Phone:</u>	<u>Other Phone:</u>
<u>Address, City, State, Zip Code:</u>		
<u>Incident Date/Time:</u>	<u>Incident Location:</u>	<u>Case Number:</u>
<u>Employee Name/Badge Number:</u>	<u>Employee Name/Badge Number:</u>	<u>Employee Name/Badge Number:</u>
<u>Witness Name:</u>	<u>Witness Address:</u>	<u>Witness Phone:</u>
<u>Witness Name:</u>	<u>Witness Address:</u>	<u>Witness Phone:</u>
<u>Describe Basis of Commendation (attach additional sheets if necessary):</u>		
<u>How would you like to see your commendation addressed?</u>		
<p>Acknowledgement: The UMD Police Department strives to address commendations, complaints, and concerns regarding the actions of our employees. In this way, we can provide a better relationship between our department and the community we serve. Therefore individuals filing commendations, complainants, and concerns must provide truthful and accurate information to the best of their ability.</p>		
<p><i>By signing below, I acknowledge that I am aware that it is a crime under Minnesota State Statute 609.505.2 to falsely report an act of police misconduct. I certify that the foregoing information is truthful and accurate to the best of my knowledge.</i></p>		
<u>Signature of Individual Filing Report:</u>		<u>Date:</u>

To Be Completed by UMD Police Department Employee:

<u>Received By:</u>	<u>Date/Time Received:</u>	<u>Referred To:</u>
<u>Commendation Number:</u>		<u>C:</u>