

UNIVERSITY OF MASSACHUSETTS
DARTMOUTH
DEPARTMENT OF PUBLIC SAFETY

CITIZEN RESPONSE FORM

Complainant Information

Name: _____

Home Address: _____

Home Phone: () _____

City, State and Zip Code

Business Address: _____

Work Phone: () _____

City, State and Zip Code

Optional (statistical purposes only)

Race: **Sex:** **Status:** () Student () Staff () Faculty () Other

The Process

The Chief/Director of Public Safety reviews every inquiry and complaint. Once your inquiry or complaint is received, it will be thoroughly investigated by a person designated by the Chief/Director of Public Safety. The investigation will usually include a review of all applicable reports, policies and procedures, examination of any evidence or medical records, and interviews with all parties and witnesses. Some inquiries may be resolved within one day, while more complex investigations will take several weeks to complete. If the Chief/Director determines that an officer violated department policies or procedures, appropriate corrective action is taken. The Chief's review will also include looking for ways to improve policies, procedures and training.

Officers/Employees Against Whom The Complaint Is Made

Name: _____ ID No.: _____ Rank: _____

Name: _____ ID No.: _____ Rank: _____

() Additional Officers/Employees Listed in Complainant Statement Section.

Witnesses

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

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