

CITIZEN COMPLAINT FORM

The Glenn County Probation Department complaint process is designed to provide citizens the opportunity to bring concerns regarding operations of the department or actions of departmental personnel to the attention of administration. An administrative investigation of allegations will be conducted to clarify issues for the complainant and, if appropriate, hold members of the Probation Department accountable.

Just as this complaint process is designed to satisfy the concerns of the citizens, it is also designed to clear our employees of allegations of wrongdoing falsely or mistakenly filed against them. In cases where a false complaint is maliciously filed against an officer, that officer is entitled to file a civil action for defamation of character in accordance with Civil Code Section 47.5. Therefore, it is important all allegations presented in a complaint to the department be based on factual information.

Officer(s) **Involved**:

•		
•		
•		
Witness(es):		
• Name:	Name:	
Address:	Address:	
Phone:	Phone:	

You have the right to make a complaint against a probation officer for any improper officer conduct. California law requires this agency to have a procedure to investigate citizens' complaints. You have a 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 a complaint and have it investigated if you believe an officer behaved improperly. Citizen complaints and any report or findings relating to complaints must be retained by this agency for at least five years.

It is against the law to make a complaint that you know to be false. If you make a complaint against an officer knowing that it is false, you can be prosecuted on a misdemeanor charge.

I have read and understood the above statement

Statement of:	Date:	Time:
Address:		
Phone:		
I verify that the above statement is true and correct	to the best of my knowled	dge and belief.
Signature:	_	
Witness:	_	

Received: Date/Time Received:

Date/Time Received:
Received by:
Investigator Assigned:
Date Complainant Notified:

Date Statement Provided to Complainant