

ROUND ROCK POLICE DEPARTMENT

Allen J. Banks Chief of Police

2701 N. Mays Street Round Rock, TX 78665 Phone: 512.218.5500 Fax: 512.218.6681

www.roundrocktexas.gov

James W. Richards Assistant Chief of Police

Justin T. Carmichael Assistant Chief of Police

CITIZEN COMPLAINT FORM

This form has been designed to document complaints against sworn members of the Round Rock Police Department.

Once received, this complaint shall be thoroughly investigated. All paperwork will remain in the Professional Standards Section, under the direction of the section Lieutenant. At the conclusion of the investigation, you will receive the determination in writing from the Internal Affairs Section.

NOTE: According to Section 614.022 of the Texas Government Code, complaints against Peace Officers must be in writing and **signed** by the person making the complaint. Furthermore, City of Round Rock and Round Rock Police Association Meet and Confer Contract Section 11.04 (Citizen Complaints) limits the days of accepting personnel complaints to sixty (60) days from the date of alleged misconduct, unless certain exceptions exist.

Additionally, this form shall be completed only by persons **eighteen (18)** years of age or older. Should the complainant be under the age of eighteen (18) please have a parent or legal guardian complete the form.

Should you need assistance with this form or process, please feel free to contact Professional Standards at 512-218-5500.

After completion, please mail or hand deliver this form to the following address:

Round Rock Police Department 2701 N. Mays Street Round Rock, TX 78665

Attn: Professional Standards Section

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Date: Name: Home Address: Home Phone:	Time: Date of Birth:
Work Phone:	
Email Address: Date of Incident: Location of Incident: Employee Receiving Statement:	Time of Incident:
Government Code, Section 614.022, provides that all complaints being considered must be written and signed by the person making the complaint.	
Please describe the incident in as much detail as possible.	
I have read the page (s) of this statement, each of which bears my signature, and the facts contained therein are true and correct to the best of my knowledge. I understand, and it is my desire, that this complaint be investigated diligently. I further understand that if the investigation proves these allegations to be false, I may be liable to both criminal and civil prosecution.	
This statement was completed at (location)	on (date) .
	Signature of Person Making Statement

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