

POLICE ACCOUNTABILITY BOARD

Complaint Form*

This form is intended for use by those who wish to file a complaint against a UC Davis Police Officer(s) for misconduct and who seek formal investigation of the matter by the Office of Compliance and Policy. If you are not such a complainant and do not seek formal investigation, you may instead want to fill out the PAB's Feedback/Suggestion Form (<https://pab.ucdavis.edu/feedback>).

Complainant Information

Last Name

First Name

Mailing address

Primary phone number

Alt. phone number

E-mail address

Age

Gender

Ethnicity

If you received any injuries as a result of this incident, please describe them here. (If filling out this form by hand, please attach additional pages as necessary.)

Incident Narrative

Date of incident

Time of incident

At which UC Davis location did the alleged violation occur?

- ☐ UC Davis – Davis campus
- ☐ UCD Health – Medical Center

Where specifically on either the Davis campus or the UCD Health Campus (Medical Center) did the alleged violation occur?

Please describe the incident that forms the basis of your complaint. It is important that you include a detailed factual description of the events that gave rise to your complaint.* (If filling out this form by hand, please attach additional pages as necessary.)

Allegations: Please check the allegation(s) that you think apply (allegations will ultimately be determined by PAB staff).

- | | |
|--|---|
| <input type="checkbox"/> Discourtesy (abusive or obscene language, failure to provide information, failure to respond) | <input type="checkbox"/> Improper Police Tow |
| <input type="checkbox"/> Discrimination (prejudicial treatment based on disability, gender, nationality, race or ethnicity, and/or religion, etc.) | <input type="checkbox"/> Improper Search (of home, person, or vehicle) |
| <input type="checkbox"/> Harassment (consistent, deliberate annoyance through repeated contacts) | <input type="checkbox"/> Improper Seizure (of person, property, or vehicle) |

☐ Improper Arrest

☐ Improper Use of Force (improper physical contact; use of baton, firearm, handcuffs, mace, pepper spray, etc.); unnecessary display of firearm

☐ Improper Citation

☐ Inadequate or Improper Investigation (Failure to investigate or make police report; false or improper police report)

☐ Improper Detention

☐ Other/Unsure

☐ Improper Police Procedures (damage to, confiscation of, or failure to return property; failure to identify oneself or no badge visible, and/or making false statements)

Police Officer Information

Badge information (if known)

Name of Police Officer (if known)

Gender of police officer: _____

Identifying characteristics of police officer (if badge number and/or name are not known):

Witness 1 Information

Witness Name

Witness Address (if applicable)

Witness e-mail

Witness phone (if applicable)

Witness 2 Information

Witness Name

Witness Address (if applicable)

Witness e-mail

Witness phone (if applicable)

Witness 3 Information

Witness Name

Witness Address (if applicable)

Witness e-mail

Witness phone (if applicable)

Certification

Please check that you have read, understand, and agree to the following statement and sign and date below:

☐ **YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A POLICE OFFICER FOR ANY IMPROPER POLICE CONDUCT. CALIFORNIA LAW REQUIRES A PROCEDURE TO INVESTIGATE CITIZENS' COMPLAINTS. YOU HAVE A RIGHT TO A WRITTEN DESCRIPTION OF THIS PROCEDURE. CITIZEN COMPLAINTS AND ANY REPORTS OR FINDINGS RELATING TO COMPLAINTS MUST BE RETAINED BY THE OFFICE OF COMPLIANCE FOR AT LEAST FIVE YEARS.***

* This complaint form is in accordance with the process set forth under Penal Code Section 832.5

Signature

Date