CASE NUMBER	

## C.S.U. Bakersfield Police Department Personnel Complaint Form

керопеа Бу						
Residence Address			_ Phone # _	Phone #		
Business Address						
Date & Time of Occurrence:	L	_ocation of Occurrence: _				
Employee(s) Involved:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				
Type of Complaint:						
Complaint is racial or identity profiling:						
Explain the type of racial or identity profiling:						
Additional Complaints of racial or identity profiling:						
Witness #1:	Address			Phone #		
Witness #2:	Address			Phone #		
Brief Description of Circumstances:						
	(Attach Additional Pag	ges If Necessary)				
Signature of Complainant				Date		
Complaint Received By				Date		
		· · · · · · · · · · · · · · · · · · ·	_			
	OFFICE USE					
Investigation Assigned To:						
Findings of Investigation:	☐ Exonerate	ed 🗆 Not	Sustained		☐ Sustained	
	☐ HR Notifi	ed 🗆 Con	nplainant Not	ified		