



Abilene Christian University Police Department



Citizen Complaint/Commendation Form

The ACU Police Department values input from the community that it serves. If you have specific comments regarding service you have received, whether positive or negative, please use this form to notify the ACU Police Department Administrators of your experience. Return the completed form to the ACU Police Department at 1634 Campus Court or mail it to ACU Box 28010 Abilene, Texas 79699. A Police Administrator will contact you for the appropriate follow up.

Officer Involved or Employee Information:

Name:	
Name:	

Person Making the Complaint/Commendation:

Name:		Phone:	
Name:		Phone:	

Information:

Please provide as much information about the reason you were contacted by the officer/employee. Specific information about the date, time, and location will help in locating information if you do not know the officer/employee's name.

Date of Contact:		Approximate Time:		AM/PM
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Location of Contact:	
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Reason for the Complaint/Commendation: (attach additional pages if needed)

[Large empty box for providing details of the complaint or commendation]

Witness Information: (if applicable)

Name:		Phone:	
Address:		Phone:	

Submitted by _____ Date _____