University of Houston System Police Operations Initial Complaint Notice

Date of complaint submittal:		Complaint # (completed by IA):		
Complainant's Full Name (Print or Type):		1	Telephone/Unit Number:	
Complainant's Address:		Email:		
Date and time of alleged incident:		Date of report:		
Location(s) where incident occurred:				
If a person was arrested, print name:		Associated case number (if known):		
Name or other identifying information of the	employee agains	t whom the allegati	on(s) is/are bei	ng made:
Name of witness(es) (if any):	Address of with	ess(es) (N/A if emp	loyee):	Telephone No.:
Clearly indicate the nature of your complaint. F that an employee violated a policy, statute or		of this process, a c		ined as an accusation
		Use reverse si	de of the form it	f more space is needed.

	An employee named in a complaint has the right to				
Complainant Signature and Date	submit a response.				
	□ I acknowledge my right, and intend to respond.				
Witness Name (Print or Type)	\Box I acknowledge my right and waive my response.				
Williess Name (Fint of Type)					
Witness Signature and Date	Employee Signature and Date				
State of Texas, County of					
	day personally appeared, known to				
me, or proved to me through identity card or other document, to be the person whose name is subscribed to the					
	he/she executed the same for the purposes and consideration				
therein expressed.	HE/SHE EXECUTED THE Same for the purposes and consideration				
Given under my hand and seal of office					
this day of, (year).					
Notary Public's Signature	Seal				
FOR INTERNAL USE	Supervisory Review Internal Affairs Investigation				
Assigned to:	Expected completion date:				