

WESTERN ILLINOIS UNIVERSITY POLICE DEPARTMENT  
COMPLAINT/ALLEGATION FORM

This Complaint/Allegation Form should be used to report allegations of police employee misconduct. Complaints regarding Western Illinois University Police Department policies and procedures should be made in writing to Derek Watts, Director, Office of Public Safety. Disagreements over the merits of an arrest, citation, or ticket do not come under the purview of the Complaint/Allegation process, unless employee misconduct is alleged.

Please provide as much information as possible, including specific dates, times, and the names, report / incident / ticket numbers, badge or car numbers of the employees involved, what specifically you are complaining about, and what you would like to see happen. You may attach additional pages as needed. It is especially important that you provide us with the names of witnesses and how they can be contacted. Depending on the circumstances and information provided, you may be contacted again for additional information.

Once your complaint form is completed, you may mail it to Director Watts, or drop it off in person. Our address is:

**Western Illinois University  
Office of Public Safety  
Mowbray Hall  
One University Circle  
Macomb, IL 61455**

Generally, complaint investigations are concluded within 30 days, unless the Director extends that time because of extenuating circumstances. If an extension is granted, you will be contacted and given an update on the progress of the investigation. The officer or employee(s) concerned will be informed of the substance of the complaint unless to do so would prejudice the investigation. Upon completion of the investigation and determination of the appropriate action, you will be notified of the disposition.

You may request confidentiality by checking the appropriate box on the Complaint Form. If you request confidentiality, we will try to respect your request, however, it is not possible to guarantee confidentiality.

If you have any questions about the process, please call 298-1949 and ask for Director Watts.

**Statement of:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

DOB: \_\_\_\_\_

Phones: \_\_\_\_\_

Best time to be contacted: \_\_\_\_\_

\_\_\_\_\_

**Please Check Appropriate Boxes:**

Statement giver is:

Aggrieved party

Witness to Incident

I request that my complaint be kept confidential to the extent allowed by law.

Yes  No

This statement consists of this form plus \_\_\_\_\_ pages

and was given on \_\_\_\_\_.  
(Date)

I want to complain about (police employee, badge number, car number) \_\_\_\_\_

\_\_\_\_\_

Because on (date) \_\_\_\_\_ at about (time) \_\_\_\_\_

He/She/They \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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What would you like to see happen as the result of your complaint?

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Lastly, the Department is required by Illinois Law [ 720 ILCS 5/26-1(a)11 ] to inform you that whoever knowingly transmits a false report without reasonable grounds regarding the conduct of a law enforcement officer is subject to a Class A misdemeanor.

**Complainant’s Certification:**

“I hereby certify to the best of my knowledge, and under penalty of perjury, that the statements made herein are true?”

\_\_\_\_\_  
(Complainant’s signature)