



Tarrant County College District
Police Department

IA #: _____

Internal Affairs
Complaint Statement

Prior to signing any portion of this statement, your complaint must be typed on a Department form, unless special circumstances exist.

Complaint Statement Notification

The filing of a formal complaint against an employee of the Tarrant County College District (TCCD) Police Department by you institutes an administrative investigation that could result in disciplinary action being taken against the employee.

A person filing a false complaint against a police employee is a violation of the Texas Penal Code, Section 37.02 - Perjury. If a person knowingly and intentionally makes a false statement under oath, or swears to the truth of a false statement previously made under oath, a person may be found guilty and punished by a fine up to \$4,000, confined in jail for up to one year, or by both fine and imprisonment.

A person filing a false statement against a police officer is a violation of the Texas Penal Code, Section 37.03 – Aggravated Perjury. If a person commits perjury as defined in Section 37.02, and the false statement is made during or in connection with an official proceeding, and is material, a person may be found guilty and punished by a fine not to exceed \$10,000, and imprisoned for not more than 10 years or less than 2 years.

I acknowledge that prior to completing my complaint statement, I did read, and do fully understand, the "Internal Affairs Statement Notification." (Do not sign any form unless in the presence of a designated witness, i.e. TCCD police officer or notary public.)

Signed this _____ day of _____, 20____. _____
Signature

SWORN TO AND SUBSCRIBED BEFORE ME, this the _____ day of _____, 20____.

SEAL

Notary Public in and for the State of Texas

My commission expires:_____

If Notary Unavailable, Signature Witnessed By TCCD Officer:

_____ ID# _____

IA #: _____

Complaint Statement

Department Member's Name: _____ ID# _____

And/Or Description: _____

Statement of Complainant

Name: _____

DOB: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Statement of Witness

Name: _____

DOB: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Incident Information

Date Occurred: _____ Time Occurred: _____ a.m. p.m.

Location: _____

- I was I was not arrested.
- I was I was not issued a citation.
- I have I have not complained against a police officer/employee previously.

All the information contained in this complaint is based on my personal knowledge, and it is true and correct.

Signed this _____ day of _____, 20 _____.
Signature _____

SWORN TO AND SUBSCRIBED BEFORE ME, this the _____ day of _____, 20 _____.
SEAL

Notary Public in and for the State of Texas

My commission expires: _____

If Notary Unavailable, Signature Witnessed By TCCD Officer:

ID# _____

Were there any witnesses to the incident? No Yes

If yes, please complete witness information:

Witness to Incident Information

Name: _____

DOB: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Other Info: _____

Witness to Incident Information

Name: _____

DOB: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Other Info: _____

Witness to Incident Information

Name: _____

DOB: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Other Info: _____
