



CCSU POLICE DEPARTMENT CIVILIAN COMMENDATION FORM



Please give this completed document to a Police Supervisor or send it to: Chief of Police, CCSU Police Department, 1500 East Street, New Britain, CT 06050 or email: policechief@ccsu.edu.

Incident Information			
Date of Incident	Time of Incident	Date Reported	Time Reported
Location of Incident			
Officer/Employee Name and Badge # (if known)			
Nature of Contact			
<input type="checkbox"/> Traffic Stop	<input type="checkbox"/> Traffic Accident	<input type="checkbox"/> Police Response	<input type="checkbox"/> Witness of Incident
<input type="checkbox"/> Other (Please describe below.)			
Details of the Contact: Please provide a full description of the circumstances that prompted this commendation. Attach supporting documentation as appropriate; including letters, e-mails, photographs, video or audio tapes, etc.			

Citizen Information (Optional)		
Name	Address (Street, City, State, ZIP)	
Home Phone Number	Cell Phone Number	Work Phone Number
E-mail		

Person Taking the Commendation		
Name/Rank/Badge #	Date Received	Time Received