



Tulalip Tribes Police Department Citizen Feedback Form

The Tulalip Tribes Police Department accepts all citizen feedback, complaints, commendations, and questions about its service or personnel. Your constructive comments provide an open channel of communications between the Police Department and our community, which enables us to maintain the highest possible services and standards. Submitting a commendation for staff members who provide excellent service reinforces our culture of service. Receiving your complaints and or concerns also helps to protect the Tulalip community from possible misconduct, provides a basis for a thorough and impartial investigative procedure to ensure accountability and trust, and serves to protect those departmental employees who perform their duties properly.

The Tulalip Tribes Police Department encourages any person(s) who believes that they have experienced or observed police misconduct to file a complaint with the Department. The Department recognizes that completing and submitting a complaint may be intimidating and stressful. We assure complainants and witnesses that they will be able to do so without fear of retaliation or adverse consequences.

If your complaint or comment involves an officer or department employee, you will be asked his/her name and incident details as appropriate. If you do not have this information, just explain what occurred and when it occurred (date, time, and location of the incident).

Complaints, or any citizen feedback, may be received by any method, including but not limited to:

- Making your complaint or comment in person at the Tulalip Tribes Police Department
- Emailing a complaint or comment to Chief Chris Sutter at tpdadmin@tulaliptribalpolice.org
- Calling the Department at (360) 716-4608
- Mailing a letter (or enclosed form) describing your complaint or comment to:
 - o Chris Sutter, Chief of Police
6332 31st Ave NE, Suite A
Tulalip, WA 98271
- Submitting the online feedback form found at <https://www.tulaliptribes-nsn.gov/Home/Government/Departments/PoliceDepartment.aspx>
- Submitting your complaint or feedback via email to the Tulalip Citizen Police Advisory Review Board at policeadvisoryboard@tulaliptribes-nsn.gov

Any complaint can be made anonymously, without giving your name. If you make an anonymous complaint, however, you will not be informed as to the result of your complaint. If you make your identity known, you will be advised of the disposition of your complaint.

Tulalip Tribes Police Department CITIZEN FEEDBACK FORM

Complaint
 Compliment
 Questions
 Recommendations

| | | |
|--------------------------|------------|------------|
| LAST Name, First, Middle | Home Phone | Work Phone |
| Address | City/Zip | Cell Phone |

| | | |
|-----------------------------|------------------------|------------------------|
| Date/Time Incident Occurred | Location of Occurrence | Report/Citation Number |
|-----------------------------|------------------------|------------------------|

| |
|---------------------------------|
| Police Officer/Employee Name(s) |
|---------------------------------|

| | | | |
|------------------------------------|---------|----------|-------------------------------|
| Witness Name (LAST, First, Middle) | Address | City/Zip | Phone Number (Home/Work/Cell) |
| Witness Name (LAST, First, Middle) | Address | City/Zip | Phone Number (Home/Work/Cell) |

Give a brief narrative of the events that led to this complaint/feedback. You may add additional sheets as necessary.

I have read and understand the above statement, which I have made of my own free will, and the facts contained therein are true and correct to the best of my knowledge.

Signature X _____ Date _____

Signature of Parent/Guardian (if under 18 years of age) _____

| | |
|-------------|------|
| Received by | Date |
|-------------|------|

Mail to: Tulalip Tribal Police Services 6332 31st Ave NE, Suite A Tulalip, WA 98271

Please email completed form to tpdadmin@tulaliptribes-nsn.gov

Departamento de Policia de Tulalip FORMULARIO DE REALIMENTACION

 Queja

 Cumplido

 Pregunta

 Recomendacion

| | | |
|-------------------------|--------------------|---------------------|
| APELLIDO, Primer Nombre | Telefono de Casa | Telefono de Trabajo |
| Domicilio | Ciudad/Zona Postal | Telefono celular |

| | | |
|--------------------------|---------------------|-------------------|
| Fecha/Hora de Ocurrencia | Lugar de Ocurrencia | Numero de Reporte |
|--------------------------|---------------------|-------------------|

| |
|-------------------------------|
| Nombre de el Policia/Empleado |
|-------------------------------|

| | | | |
|--|-----------|--------------------|------------------------------|
| Nombre de el Testigo (APELLIDO, Primer Nombre) | Domicilio | Ciudad/Zona Postal | Telefono (Casa/Trabajo/Cell) |
| Nombre de el Testigo (APELLIDO, Primer Nombre) | Domicilio | Ciudad/Zona Postal | Telefono (Casa/Trabajo/Cell) |

De una breve descripción de los hechos referentes a su queja/realimentacion. Puede agregar hojas adicionales si es necesario.

He leído y comprendo esta declaración. Mi declaración escrita contiene hechos que son verdaderos y correctos.

Firma X _____ Fecha _____

Firma de un Padre/Tutor (si es menor de 18 años) _____

| | |
|--------------|-------|
| Recibida por | Fecha |
|--------------|-------|

Por correo mande esta forma a: Tulalip Tribal Police Services 6332 31st Ave NE, Suite A Tulalip, WA 98271

Envíe por correo electrónico el formulario completado a tpdadmin@tulaliptribes-nsn.gov