

Cottage Grove Police Department COMMENDATION REPORT



Cottage Grove Public Safety collectively serves our community compassionately providing protection of life and property. We do this with honor, integrity, pride and professionalism. We are Cottage Grove Public Safety.

Commendations

The Cottage Grove Police Department is committed to maintaining integrity, discipline, and a relationship with the community of trust and confidence. We welcome citizen's recognition of police employees performing in an effective, quality manner. If you have had a positive experience involving one of our employees and you believe the employee should be recognized for their performance, please take the time to fill out the form below. When you have completed the Commendation form, either bring it to the police department, Monday through Friday, 7:00 a.m. to 4:30 p.m. or mail it to:

Chief of Police
Cottage Grove Police Department
12800 Ravine Parkway
Cottage Grove, MN, 55016

Please complete this form as fully and accurately as you are able. When describing the incident, write down a detailed account as you remember it. Whenever possible, include the location, date, time, and telephone number, and the names and addresses of other known witnesses. If known, give the name(s) of the officer(s) involved. If you do not know the officer's name(s), use the narrative section to describe the officer(s) in as much detail as you can remember. If necessary, attach additional sheets to this form. It's also important that you include as much as you remember of any conversation you or others had with the officer(s) or any actions taken by the officer(s). Describe in detail what you feel the officer(s) or any police department employee did that should be recognized.

Citizen commendations will be forwarded to the Chief, the employee's supervisor, the commended employee and to their personnel file.

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Citizen Name	reportii	Home Phone		Other Phone
Address (tradicals Co. 1941)	Ct-:			
Address (Include Street Address, Cit	y, State ar	nd Zip code)		
Commendation Information				
Incident Date and Time	ncident Lo	ocation		Case Number (If Known)
Employee Name (Badge number if k	nown) A	dditional Employee Name (If	f Applicable)	Additional Employee Name (If Applicable)
Witness Name	V	Vitness Address		Witness Phone number
Witness Name	V	Vitness Address		Witness Phone number
Describe Basis for Commendation (a	ttach addit	tional sheets if necessary)		
(Continue on Page 3 if more room ne	eeded)			
Citizen Signature		D	ate	
Receipt and Disposition Inf	ormatio	n (to be completed by	Police)	
Employee Receiving Report		Date/Time Received	- 3,	Referred to
0 1 1		 		
Commendation Officer File		Date Commendation Forwarded		Case Number

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Commendation Continuation

Commencation Continuation								
Dε	Describe Basis for Commendation (Continuation)							
50	Social Sacial of Communication (Continuation)							
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