



San Marcos Fire Department

Conduct Report

If we are to be successful in maintaining our cooperative and productive relationship with the public, it is important that we know when we are doing a good job and as well as bad. If you have information that you believe is important for us to know, please provide a detailed description of the incident or circumstances that you wish to report. We appreciate your participation and will use the information you provide to improve our service to the public.

You may be interviewed by the person receiving this report.

Circle Type of Report: **Commendation / Complaint**

Date & Time Reported: _____ Incident Number: _____

Person Reporting: _____ Full Name, Street Address, City, Zip: _____ Date of Birth: _____

Home Phone: _____ Business Phone: _____ Driver's License Number & State of Issue: _____

Location of Occurrence: _____ Name of Location & Address: _____

Witnesses: _____ Full Name, Street Address, City, Zip: _____ Date of Birth: _____

Home Phone: _____ Business Phone: _____ Driver's License Number & State of Issue: _____

Witnesses: _____ Full Name, Street Address, City, Zip: _____ Date of Birth: _____

Home Phone: _____ Business Phone: _____ Driver's License Number & State of Issue: _____

INCIDENT DETAILS

Name of Employee involved or a description (if known): _____

Please include a detailed description of the incident, circumstances or conduct that you wish to report

(Use additional pages if necessary):

Citizen's Signature _____ Date: _____

If the information you provide is regarding an allegation of wrongful conduct on the part of a fire department employee, please read and have a notary witness your signature below:

Citizen's Statement: I believe that the facts I have provided are true and correct to the best of my knowledge. I agree to present this complaint in person to the appropriate investigative authority should the complaint result in a disciplinary proceeding against the firefighter(s) or other fire department employee(s).

SWORN TO & SUBSCRIBED BEFORE ME, this the _____ day of _____ A.D. _____.

Citizen's Signature

Notary Public
Hays County,
My Commission Expires: _____



Interview

The person receiving this completed form may interview you to gather additional details or important aspects about the conduct you are reporting. At the completion of the interview, you will be asked how you would like us to proceed. The space immediately below this statement is for the interviewer's use.

Person Receiving Form:

Date & Time Received:

Interviewed By:

Date & Time:

Results of the Interview:

Signature of Interviewing Employee:

After this interview, I would like this conduct form referred to the officer(s) or employee(s):

Shift BC: _____

Asst. Chief: _____

Fire Chief: _____

I would like a follow-up progress report of the action taken within 30 days: Yes / No _____
Citizen's Signature

Received Date: _____ Shift BC: _____ Asst Chief: _____ Fire Chief: _____