



RHODE ISLAND DEPARTMENT OF PUBLIC SAFETY

Division of Sheriffs

Headquarters

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Colonel Darnell S. Weaver
Director, Department of Public Safety
Superintendent, Rhode Island State Police

Chief David M. DeCesare
Sheriff
Rhode Island Division of Sheriffs

Citizen Feedback Reporting Form

The Rhode Island Division of Sheriff's goal is to improve the quality of services provided, to promote a high level of public confidence, and to enhance and maintain the professional integrity of this Division.

This form is not for filing a formal complaint against Division personnel. To file a formal complaint, please complete the **Citizen Complaint Reporting Form**. To assess a **Citizen Complaint Reporting Form**, go to www.sheriffs.ri.gov. **Citizen Feedback Reporting Forms** may be delivered in person or mailed to the above address attention: **Professional Standards Division**.

DATE OF INCIDENT: _____	TIME OF INCIDENT: _____
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CITIZEN PROVIDING FEEDBACK (OPTIONAL)	
NAME: _____	TELEPHONE: _____
ADDRESS: _____ _____	

WITNESS(ES) TO INCIDENT	
(1). NAME: _____	TELEPHONE: _____
ADDRESS: _____ _____	
(2) NAME: _____	TELEPHONE: _____
ADDRESS: _____ _____	

EMPLOYEES INVOLVED IN THE INCIDENT (IF KNOWN)

RANK/NAME: _____

BADGE NUMBER: _____

RANK/NAME: _____

BADGE NUMBER: _____

PLEASE PROVIDE A DETAILED NARRATIVE OF FEEDBACK:

Cont'd

PLEASE PROVIDE A DETAILED NARRATIVE OF FEEDBACK:

Citizen Providing Feedback Signature
(Optional)

Date

Print Name