PERSONNEL COMPLAINT PROCEDURE

It is the policy of the Chilton County Sheriff’s Office to investigate all complaints made against the department or its personnel, thoroughly, completely and impartially. A proper relationship between the department and the citizens we serve, fostered by trust and confidence, is essential to effective law enforcement efforts.

The Chilton County Sheriff’s Office complaint process has been developed to ensure this proper relationship provides people with a fair and effective method to address legitimate complaints against Sheriff’s Office personnel and to protect deputies and employees from false charges of misconduct or wrongdoing.

The Sheriff’s office would prefer you speak with a supervisor when you file a complaint. We do this to ensure that we obtain all the necessary information that we will need to fully and impartially investigate your complaint, as well as expedite the resolution of any complaints.

If you do not want to speak with a supervisor, you are able to file a complaint against an employee or deputy by fully and accurately completing the attached complaint form. We ask that you print neatly or type the form if possible. An electronic version of this form is available online if you prefer to utilize that format.

If you need help with the complaint form, which is attached, you can get a supervisor with the Chilton County Sheriff’s Office to assist you with any questions you may have. When you completed the complaint form, you can return it to the Sheriff’s Office in any of the following ways:

- Drop it off at the Sheriff’s Office front desk sealed in a envelope; 500 2nd Ave North Clanton, Al 35045
- Mail it to the Sheriff’s Office; 500 2nd Ave North Clanton, Al 35045
- Email it to the Sheriff’s office at the link contact us.

The Sheriff’s Office will assign your complaint to a supervisor to investigate. The supervisor will contact you and send you a receipt of your complaint. You can contact that supervisor any time to follow the progress of your complaint.

It certainly is unfortunate that you had the occasion to be less satisfied with a member of our department, and we certainly hope that all future contacts with members of our department are positive ones.
CHILTON COUNTY SHERIFF’S OFFICE

PERSONNEL COMPLAINT REPORT RECEIPT

On ______________, (Name) ________________________ filed a complaint with the Chilton County Sheriff’s Office concerning the conduct of ________________. This was in reference to an incident which occurred on ________________ and was documented in report/citation number ________________. This form acknowledges receipt of the complaint. You should be aware of the following:

1. The Chilton County Sheriff’s Office investigates all complaints in an impartial manner.
2. The Sheriff’s Office will investigate this allegation as an administrative matter (violation of Agency policy) unless there is evidence that a crime was committed.
3. In administrative investigations, the burden of proof is “preponderance of the evidence.”
4. Sworn statements may have to be taken from me or other persons who might be witnesses.
5. I will be notified of the status of my complaint during the course of the investigation and at the conclusion.
6. The accused Deputy or employee has rights that the agency cannot violate during the investigation.
7. I have received a copy of the completed initial Personnel Complaint Report.
8. If I have any further questions, I can call and speak with the supervisor listed herein.

____________________________________  _______________________
Signature of person filing complaint (when feasible)              Date

Supervisor receiving complaint:

Printed name: _________________________________

Signature: _________________________________
CHILTON COUNTY SHERIFF’S OFFICE

PERSONNEL COMPLAINT REPORT

Person making complaint: _____________________________      D.O.B: __________
Home Address: ____________________________________
Work name and address: _____________________________
Home Phone: ____________ Work Phone: _____________ Cell Phone: _____________
What is the best time to contact you? ______________________________
Person you are making the complaint against: ______________________________

IF YOU DO NOT KNOW THE PERSON'S NAME, DESCRIBE HIM/HER BELOW.

Date of incident: ____________ Time occurred: ___________ Case #: _____________
Where did the incident take place: __________________________________________
Describe what happened; be specific as to what was said. Include information on any witnesses:
________________________________________________________________________
________________________________________________________________________
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________________________________________________________________________
Deputy/employee’s name: ______________________________________
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I declare this to be a true and correct report and the information therein to be a fact. I further understand that I may be criminally charged for filing a false report. False reporting to law enforcement authorities is a Class A Misdemeanor.

___________________________________  __________________________
Printed name of person filing complaint       Date

___________________________________
Signature of person filing complaint