

Rhineland Police Department

Employee Commendation

Date of contact with employee: _____

Time of contact with employee: _____ AM PM

Location of contact (i.e., address, cross streets, or business name, etc.)

Employee's name, Badge Number (if known) and assignment

Name	Badge Number	Assignment
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Name	Badge Number	Assignment
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Name	Badge Number	Assignment
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What initiated your contact with the employee?

- | | |
|--|--|
| <input type="checkbox"/> Police response to your call | <input type="checkbox"/> Pick up property |
| <input type="checkbox"/> Traffic Stop | <input type="checkbox"/> Visit a Detective |
| <input type="checkbox"/> Traffic Crash | <input type="checkbox"/> Visit/release a prisoner |
| <input type="checkbox"/> Made a report at police station | <input type="checkbox"/> Witness at a police investigation |
| <input type="checkbox"/> Other _____ | |

What would you like to commend about the employee's performance?

(Continue on Reverse)

Print your Name _____ Signature _____

Address _____
Street Address City State Zip Code

Telephone Number (____) _____

Received by: _____ Employee's Signature: _____