

FREETOWN POLICE DEPARTMENT
225 Chace Road
East Freetown, MA 02717
(508) 763-4017

EMPLOYEE COMMENDATION

1. Date of contact with employee: _____
2. Time of contact with employee: _____ AM PM
3. Location of contact (i.e., address, cross streets, or business name. etc.):

4. Employee's name, badge or identification number (if known) and assignment (i.e., police officer, dispatcher, etc):

Name	Badge/ID Number	Assignment
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|-------|-------|-------|
| _____ | _____ | _____ |
|-------|-------|-------|
5. What initiated your contact with the employee?
 - Police response to your call
 - Traffic stop
 - Traffic collision
 - Medical emergency
 - Other: _____
 - Visit/release a prisoner
 - Witness at a police investigation
 - Telephone call to dispatch

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

Attach additional pages if necessary

Print your Name: _____ Signature: _____

Address: _____ City/State/Zip: _____

Telephone Number: _____

Department Use Only
Date Received: _____