OAKDALE POLICE DEPARTMENT
1584 Hadley Avenue N
Oakdale, MN 55128
Phone: 651-738-1025
www.ci.oakdale.mn.us

PERSONNEL COMPLAINT FORM

COMPLAINANT INFORMATION			
Complainant Name (Last, First, MI)			
Address		State	Zip
Phone	Email		

OCCURRENCE INFORMATION	
Location of Occurrence	
Date Occurred	Time Occurred
Employee(s) Name	Title
Related ICR or Citation Number	
Witness Name	
Witness Address	Witness Phone
Complaint Details	

In accordance with MN State Statute 609.505 Sub. 2 whoever reports an act of police misconduct knowing that information provided is false is guilty of a crime. By signing below you attest that the information provided is a true account and allege misconduct by a member of the Oakdale Police Department.

SIGNATURE	
Applicant Signature:	Date:

The Oakdale Police Department investigates alleged misconduct by its members. This form can be completed, signed and dropped off or mailed to the department, attention of the Chief or Captain.