



Saginaw Public School District  
Campus Security Department

Incident Complaint Form

(Part 1 of 2)

**Complainant** \_\_\_\_\_ Date \_\_\_\_\_

Incident Day/Date \_\_\_\_\_/\_\_\_\_\_ Time \_\_\_\_\_ to \_\_\_\_\_

Incident Type \_\_\_\_\_ Location \_\_\_\_\_

**Suspect #1** Name \_\_\_\_\_ DOB/Age \_\_\_\_\_

Address \_\_\_\_\_ Tx \_\_\_\_\_ Race \_\_\_\_\_ Gender \_\_\_\_\_

Ht. \_\_\_\_\_ Wt. \_\_\_\_\_ Clothing \_\_\_\_\_

**Suspect #2** Name \_\_\_\_\_ DOB/Age \_\_\_\_\_

Address \_\_\_\_\_ Tx \_\_\_\_\_ Race \_\_\_\_\_ Gender \_\_\_\_\_

Ht. \_\_\_\_\_ Wt. \_\_\_\_\_ Clothing \_\_\_\_\_

**Witness #1** Name \_\_\_\_\_ DOB/Age \_\_\_\_\_

Address \_\_\_\_\_ Tx \_\_\_\_\_ Race \_\_\_\_\_ Gender \_\_\_\_\_

**Witness #2** Name \_\_\_\_\_ DOB/Age \_\_\_\_\_

Address \_\_\_\_\_ Tx \_\_\_\_\_ Race \_\_\_\_\_ Gender \_\_\_\_\_

**Witness #3** Name \_\_\_\_\_ DOB/Age \_\_\_\_\_

Address \_\_\_\_\_ Tx \_\_\_\_\_ Race \_\_\_\_\_ Gender \_\_\_\_\_

Signature (Complainant) \_\_\_\_\_ Date \_\_\_\_\_

Signature (Administrator) \_\_\_\_\_ Date \_\_\_\_\_

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