



San Francisco Juvenile Probation Department
375 Woodside Avenue, Room 243
San Francisco, CA 94127

CITIZEN COMPLAINT FORM

To: Chief Probation Officer

I am _____ and I live at _____
(Please print your name here)

(Your address)

My phone number is: _____

I have a complaint about: _____
Issue or Name of Probation Department employee(s)

Is this person a Peace Officer? Yes No I do not know

Please mark all boxes if you believe this complaint involves actions that are:

Criminal Non-Criminal Identity profiling Racial profiling Language Access

ONLY IF profiling is marked, please also fill out the following boxes:

Was the profiling pertaining to any of the following: Race Color

Ethnicity Nationality Age Religion Gender Gender expression

Sexual orientation Mental disability Physical disability

The details of the incident or complaint are as follows (additional pages may be attached):

Please name witnesses, if any:

WITNESS: Name: _____ Address _____

WITNESS: Name: _____ Address _____

I declare under penalty of perjury that the above is true and correct according to my best knowledge.

Signature: _____

Date: _____

PLEASE RETURN COMPLETED FORM TO ROOM 243

To be completed by Chief's office only: JPD# _____