

Appendix A

POST Reports

Alewife Police Department

Complaint Form

A1

Date: _____ Time: _____ CAD number: _____

Complaint taken by: _____ Method: _____
(in person, telephone, email, etc.)

Summary of complaint:

Approximate date/time of incident: _____ -

Officers identified: _____

Location: _____

Complainant: _____

(name, address, telephone #, email address)

(If complainant chooses not to identify, conduct full interview)

Witnesses identified: _____
(name, address, telephone, email address)

This statement is true to the best of my knowledge:

Complainant: _____
Printed name Signature

Copy of Department of Complaint provided to complainant? ☐ Yes ☐ No

Complaint taker: _____
Printed name Signature

Alewife Police Department

Complaint Form

A2

Not for complainant

Victim's demographics:

Observed by complaint taker: _____

From complainant: _____

Actions taken by report taker (investigation of complaint, notice to superior officers)

Complaint taker's suggested disposition:

- ☐ Minor matter ☐ Anonymous w/out follow up info ☐ Professional standards follow-up
☐ Minor matter handled by complaint-taker? (Record details on reverse or attach a report).

Internal Affairs Disposition Review

IA report number: _____

Reviewer: _____ Date/Time: _____

☐ Pattern of violations, 555 CMR 1.01(1)(c)(3)

☐ Assigned for investigation Assigned to: _____

☐ Assigned as minor matter Assigned on: _____

This is:

- ☐ Minor matter ☐ Anonymous w/out follow up info ☐ Reportable to POST

Discretionary submission to POST (555 CMR 1.01(1) (c)(4)): _____

Chief's signature

Alewife Police Department

Initial Report of Complaint to POST

B

Day of week, date, and time of complaint: _____
Month/Day/Year

POST due date (second business day following business day of receipt): _____

Agency IA number: _____

Description of complaint (brief description): _____

Date and time of incident: _____

Complaint form attached: ☐ Yes ☐ No

Subject Officer(s):

Name

Certification Number(s)

☐ See supplement for more officers

Victim's demographic: _____
(race, ethnicity, sex, gender identity, sexual orientation, religion, mental/physical disability, immigration status, socioeconomic or professional level and/or other data volunteered by victim)

This complaint sets out the following allegations:

☐ Conduct was biased based on a prohibited characteristic.

☐ Conduct was unprofessional.

☐ Conduct was excessive, prohibited, or deadly force.

☐ Conduct resulted in serious bodily injury or death.

Investigating agency contact: _____ Telephone: _____

Transmitted to POST on date: _____ Time: _____ Method: _____

Transmitting officer: _____
Name Signature

Alewife Police Department

Second Report (Investigation Complete) to POST

C1

Agency IA number: _____ Investigator: _____

Subject Officer(s):

Name

Certification Number

☐ See supplement)

Statement of allegations: _____

☐ For witnesses interviewed (and unavailable witnesses) see attachment C2.

☐ For evidence collected (and unavailable) see attachment C3.

Factual findings by investigator: _____

The factual findings supported violation of these laws or policies: _____

90-day date: _____ Completed by 90-day date: ☐ Yes ☐ No

Reasons for delay: _____

Discipline imposed by Chief: _____

Chief's recommendation for POST action: _____

Chief's: _____

Printed name

Signature

Date

Transmitted to POST on date: _____

Method: _____

Transmitting officer: _____

Printed name

Signature

Alewife Police Department

Second report (WITNESS LIST) to POST

C2

Agency IA number: _____ Investigator: _____

Witnesses interviewed (if interview was not recorded indicate by "NR" after name):

Name	Phone	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Witnesses unavailable:

_____	_____	_____
Name	Phone	Address
Reason unavailable: _____		

_____	_____	_____
Name	Phone	Address
Reason unavailable: _____		

_____	_____	_____
Name	Phone	Address
Reason unavailable: _____		

_____	_____	_____
Name	Phone	Address
Reason unavailable: _____		

C3

Reason: _____

Alewife Police Department

Third Report (Final Agency Disposition) to POST

D

Agency IA number: _____ Investigator: _____

Subject Officer(s):

Name

Certification Number

☐ See supplement)

Adjudicatory process description: _____

Discipline recommended by investigator: _____

Discipline imposed by Chief: _____

Discipline recommended by Chief to appointing authority: _____

Chief's recommendation for POST action: _____

Factual findings supporting POST action: _____

Chief: _____
Printed name Signature Date

Transmitted to POST on date: _____ Method: _____

Transmitting officer: _____
Printed name Signature

Alewife Police Department

Report to POST: Resigned Under Investigation/Before Discipline



Agency IA number: _____ Investigator: _____

Subject Officer: _____
Name Certification Number

The officer submitted a resignation effective on _____ that was

- ☐ Prior to the conclusion of the investigation, or
- ☐ Following the conclusion of the investigation but before the agency had imposed disciplinary action.
- ☐ The resignation was in writing. (The resignation and any associated agreement is attached.)
- ☐ A record of the officer's employment is attached, including:
 - ☐ Dates of hire, resignation, and retirement;
 - ☐ A list of complaints, internal investigations, reprimands, disciplinary actions, retraining or other sanctions; and
 - ☐ A list of commendations and awards.
- ☐ A description of the events or complaints surrounding the resignation is attached.

The investigation is:

- ☐ Complete and has been reported to POST previously. (See that report for the investigation results.)
- ☐ Complete and the department's report on the investigation is submitted with this report. (See that report for the investigation results.)
- ☐ Not complete but will continue as required. (The results to date may be found attached to this report).

I, _____, recommend POST take the following action:

Police [Chief, Commissioner, Superintendent]

Transmitted to POST on date: _____ Method: _____

Transmitting officer: _____
Printed name Signature

Appendix B

IA Forms

Alewife Police Department

Analysis of Conflict of Interest and Bias (Form 1)

Agency IA number: _____ Investigator: _____

Subject Officer(s): _____

☐ Officer-involved injury or death? ☐ Improper force? ☐ Biased conduct?

Investigator(s): _____

Investigation Supervisor: _____

The investigator(s) and investigation supervisor:

- Are not the parent, child, sibling, or spouse of a complainant, victim, or subject officer.
☐ True ☐ Not true
- Are not the parent, child, or sibling of the spouse of a complainant, victim, or subject officer.
☐ True ☐ Not true
- Have no business interest or financial interest in common with a complainant, victim, or subject officer or the spouse of a complainant, victim, or subject officer. ☐ True ☐ Not true
- Are not currently competing against a subject officer for a promotion, appointment, or position within the police department, the parent organization, or another organization.
☐ True ☐ Not true
- Are not subjects of nor implicated by the complaint. ☐ True ☐ Not true
- Have no other apparent or perceived conflict of interest regarding a complainant, victim, or subject officer.
☐ True ☐ Not true
- Have no potential for bias or prejudice against a complainant, victim, or subject officer.
☐ True ☐ Not true

Explanation (if required): _____

Conflict analysis by: _____
Printed name Signature Date

Chief's approval: _____
Printed name Signature Date

Internal Affairs Investigation Event Record Summary (Form 2)

Description:

[illegible]

Alewife Police Department

Internal Affairs Investigation Checklist — Internal Sources (Form 3)

IA Number: _____

Investigator: _____

Checklist:

	Number or date/time or officer	In-file date
Dispatch entry:	_____	_____
Officer report:	_____	_____
	_____	_____
	_____	_____
	_____	_____
Telephone call(s):	_____	_____
	_____	_____
Radio traffic:	_____	_____
Body camera(s):	_____	_____
	_____	_____
	_____	_____
Cruiser camera(s):	_____	_____
	_____	_____
	_____	_____
MDT records:	_____	_____
Booking video:	_____	_____
Police surveillance video:	_____	_____
Other department video:	_____	_____
Payroll records:	_____	_____

Alewife Police Department

Internal Affairs Investigation Checklist, External Sources (Form 4)

IA Number: _____

Investigator: _____

Documents

Source/description	#	Date in file
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Audio recordings

Source/description	#	Date in file
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Video recordings

Source/description	#	Date in file
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Outside interviews

Source/description	#	Date in file
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Outside communications (phone, text, social media, email)

Source/description	#	Date in file
_____	_____	_____
_____	_____	_____

Alewife Police Department

Administrative Interview (Form 5)

Tape Recorder Test

Once the recording device is placed where it will be during the interview, speak from the location where the farthest speaker will be sitting.

The date is _____, the time is _____. This is **(name/rank)**, at **(name/location)**. Present with me is **(name/rank)**. We are about to interview **(subject/name/rank)** in connection with **(case number)**, which occurred on **(date of incident)**. I am testing the tape recorder in preparation of the interview.

Play back to ensure recorder is working and then fast forward to the conclusion of the tape recorder test.

Statement of Rights and Warning

For the record, I will make the following statement and to advise all parties present that this proceeding is being recorded. **(Name of employee/officer)** you are not in custody, and you are not under arrest. You are free to leave but may be subject to disciplinary action, up to and including termination, if you leave prior to the conclusion of this interview.

You are required to answer questions that are narrowly and specifically drawn regarding the performance of your duties, your professional responsibilities, and your fitness to perform those duties. You are required to answer all questions truthfully and to the best of your knowledge. Failure to do so will result in disciplinary action up to and including dismissal. In addition to intentionally making false statements or reports, the intentional omission of significant or pertinent facts is also considered untruthfulness.

If the answer you would give to a question may tend to incriminate you, you may assert your rights not to answer the question under the Fifth Amendment of the U.S. Constitution and/or Article 12 of the Massachusetts Declaration of Rights. You will not be subject to disciplinary action solely for properly invoking your rights.

In addition to causing departmental discipline, untruthfulness during this investigation must be reported to the Peace Officer Standards and Training Commission.

Please state your rank and name for the purpose of identification on the recording.

- 1) Today is **(day of week and date)**. The time is _____
- 2) My name is **(title and full name)**
- 3) Present with me representing the department is **(name)**. Please state your rank and name for identification on the recording.

(over)

- 4) I am conducting an internal investigation into **(case number)**
- 5) The interview is taking place at **(location)**, recorded on **(method: digital or tape recording)**
- 6) Officer, for the record please state your name, rank, and current assignment.
- 7) You have someone present and acting as your union/legal representative. Please state your position and name for identification on the recording.
- 8) **(If anyone else is present, ask them to identify themselves for the recording.)**

Your union representative or attorney is here to advise you and will not be allowed to answer questions for you. If at any time you believe that the answer you may give to a question may incriminate you, you may ask to consult with your representative and you will be given reasonable time to do so. However, you may not unreasonably delay the interview. Failure to answer questions directly, or the continued interruption of the interview, will not be tolerated and shall be grounds for discipline. At the conclusion of the interview, you or your representative will be allowed to make a statement, express concerns, or give a summary of your position. Do you understand this ground-rules?

- 9) Officer you are being interviewed as a **(subject/witness)** in this matter.

ALEWIFE POLICE DEPARTMENT

Order-Notice-Rights (Form 6)

Date: _____

To: _____

From: _____

You are ordered to participate in this investigative interview by providing complete and truthful answers to all questions posed to you concerning the performance of your duties, your fitness to perform those duties, and your professional responsibilities in your employment by the Town of Alewife.

However, you have the right to remain silent when your answer to a question would tend to incriminate you in a criminal matter. If an answer may tend to incriminate you, the invocation of your rights against self-incrimination under the Fifth Amendment to the US Constitution and/or Article 12 of the Massachusetts Declaration of Rights is sufficient to comply with your obligation to obey the order to answer that question. Assertion of your right to remain silent must be done on a question-by-question basis and may only be done when your answer to a specific question might tend to incriminate you.

The failure to provide a complete and truthful answer to any question is considered a failure to obey an order unless you assert a constitutional right to remain silent. The failure to obey an order could result in disciplinary action being taken against you, up to and including termination of employment.

PLEASE READ THE FOLLOWING, CHECK THE APPROPRIATE BOX, THEN SIGN AND DATE THIS NOTICE

- ☐ I wish to claim my constitutional protections under the U.S. Constitution's Fifth Amendment and the Massachusetts Declaration of Rights, Article 12.

- ☐ I wish to assert my Fifth Amendment privilege against self-incrimination, but agree to waive my Article 12 privilege. I will answer questions because I am ordered to do so, but my answers may not be used against me in a criminal proceeding. I understand I may still assert my Article 12 rights in response to any particular question(s). I also understand that a criminal proceeding can be initiated against me based upon evidence obtained from other sources.

Employee signature: _____

Date: _____

Witness: _____

Date: _____

