

**ISLE OF WIGHT COUNTY SHERIFF'S OFFICE
COMPLAINT/INTERNAL AFFAIRS REPORTS**

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ISLE OF WIGHT COUNTY SHERIFF'S OFFICE

PO Box 75, 17110 Monument Circle, Isle of Wight, VA 23397
Phone (757) 357-2151 Fax (757) 357-0706



Jame R. Clarke, Jr.
Sheriff

REPORT OF COMPLAINT AGAINST LAW ENFORCEMENT PERSONNEL

CONFIDENTIAL

Name of complainant: _____

Address where you can be contacted: _____

Phone Numbers: Home: _____ Work: _____ Cell: _____

Date and time of incident: _____

Location of incident: _____

Name of deputy(s) or employee(s) against whom this complaint is being filed, or other identifying information (car number, unit number, etc.)

Name: _____ ID#: _____ Rank: _____

Vehicle: _____ Unit#: _____

Name: _____ ID#: _____ Rank: _____

Vehicle: _____ Unit#: _____

Name: _____ ID#: _____ Rank: _____

Vehicle: _____ Unit#: _____

Names, addresses, phone numbers, or other identifying information concerning any witnesses, if applicable:



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ADMINISTRATIVE PROCEEDINGS RIGHTS NOTICE OF ALLEGATIONS

NAME _____ DATE _____ TIME _____

Section 9.1-501 of the Code of Virginia provides that whenever an investigation by an agency focuses on matters, which could lead to the dismissal, demotion, suspension or transfer for punitive reasons of a law-enforcement officer, the following conditions shall be compiled with:

1. Any questioning of the deputy shall take place at a reasonable time and place as designated by the investigating officer, preferably when the deputy under investigation is on duty and at the office of the investigating officer unless circumstances dictate otherwise.
2. Before questioning the deputy, he shall be informed of (1) the name and rank of the investigating officer and (2) of any person to be present during the questioning and (3) the nature of the investigation.

Sheriff's Office policy provides that:

1. You are entitled to read the complaint lodged by the complainant.
2. Refusal to answer all questions pertaining to the allegations made by the complainant, either orally or in writing, shall be grounds for disciplinary action and may result in dismissal from the Sheriff's Office.
3. The answers given during the investigation of an administrative matter will not be used against you in any criminal proceedings.
4. The answers given do not constitute a waiver of your privilege against self-incrimination as related to criminal matters.
5. Prior to being criminally charged, and/or during an administrative investigation, no attorney will be permitted to be present.

Accordingly, you are hereby advised that the following allegations have been directed to you:

COMPLAINANT(S): 1. _____ 2. _____

The undersigned hereby acknowledges receipt in writing of the charges or allegations against him/her and his/her rights as pertaining to administrative proceedings.

Signature

Witness



Jame R. Clarke, Jr.
Sheriff

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POLYGRAPH EXAMINATION ACKNOWLEDGEMENT OF RIGHTS

I, _____ have been ordered by
Sheriff James R. Clarke, Jr. to submit to a polygraph examination as a condition of employment
in connection with the investigation of: _____

I understand that my answers to such examination, as they relate to the above-referenced
investigation, will not be used to prosecute me. _____ (initial)

I understand my refusal to submit to such examination or refusal to answer questions pursuant
to such examination shall lead to disciplinary action, which may include termination of my
employment. _____ (initial)

I understand that my responses do not constitute a waiver of my privilege against self-
incrimination as it relates to criminal matters. _____ (initial)

I understand my refusal to sign this form shall lead to disciplinary action which may include
termination of my employment. _____ (initial)

Employee Signature

Witness Signature

Date

Date



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CERTIFICATE TO BE COMPLETED IN THE EVENT OF REFUSAL TO SIGN POLYGRAPH EXAMINATION ACKNOWLEDGEMENT OF RIGHTS FORM

I, _____, hereby certify the Polygraph Examination
(Name)

Acknowledgement of Rights Form was presented to _____
(Name and Rank)

on this date. The contents of the form were made known to him/her, and that failure to sign the

form was grounds for disciplinary action, including dismissal from employment, the said

employee, _____ refused in my presence to sign the Polygraph
(Employee)

Examination Acknowledgement of Rights Form.

Employee Signature

Witness Signature

Date

Date