



TPWD Complaint Form

Instructions

Complete all three pages of form. Either complete form electronically or print out to fill in using black ink.

Mail or email to:

TPWD-Internal Affairs
4200 Smith School Rd
Austin, Texas 78744-9989
complaints@tpwd.texas.gov

Office Use

Assigned to:

By:

Date:

IA Number:

Division:

Complainant

Full Name:

Street Address:

City, State, Zip:

Home Phone:

Work Phone:

Mobile Phone:

Email:

Employee Involved

Name:

State Park (if applicable):

Street Address:

City, State, Zip:

Office Phone:

Witnesses Involved

Name:

Address:

Phone:

Name:

Address:

Phone:

Name:

Address:

Phone:

Name:

Address:

Phone:

(complete pages 2 and 3)

Complaint

Clearly indicate the details involved in the complaint and attach any records, reports, or statements, etc. which support this statement. If more space is needed for the complaint, please attach additional pages.

I hereby declare that the above statement is true and correct to the best of my knowledge. I understand that a copy of this signed complaint will be given to the officer or employee within a reasonable time after the complaint is filed. I further understand that the need for a sworn (i.e. notarized) statement at a later date may be required.

Complainant's Signature

Date

Office Use

Copy Received

Employee Signature

Date

Response Waived

Employee Signature

Date

Texas Parks and Wildlife Department maintains the information collected through this form. With few exceptions, you are entitled to be informed about the information we collect. Under Sections 552.021 and 552.023 of the Texas Government Code, you are also entitled to receive and review the information. Under Section 559.004, you are also entitled to have this information corrected.