



# UCI Police Department Employee Commendation

**Please mail or drop off the completed form to:**

UCI Police Department  
Attention: Chief of Police  
100 Public Services Building  
Irvine, CA 92697-4900

We thank you for taking the time to complete this form.

Your Name		Phone Number	Today's Date
Employee's Name		Badge Number	
Date of Incident	Time of Incident	Location (i.e. address, cross street, business name, etc.)	
What would you like to commend about the employee's performance?			

You may use additional paper as needed to complete the form.