

# Waterbury Police Department Employee Recognition Form



Full Name of Nominee \_\_\_\_\_

Rank/Title \_\_\_\_\_ Duty Assignment \_\_\_\_\_

Type of Award Recommended \_\_\_\_\_

Statement of Circumstances Supporting the Recommendation:

Attach case report supporting recognition. And note in statement, if body worn camera captured recognition. Reminder each person being nominated should be on form.

Name of Person Submitting this Recommendation \_\_\_\_\_

Incident Report Case number \_\_\_\_\_ Date of Submission \_\_\_\_\_

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### Action of the Awards Board (To be completed by the awards board)

Recommendation approved as submitted. Type of award approved. \_\_\_\_\_

Approved for different award. Type of award approved. \_\_\_\_\_

No action taken. Date of decision by Awards Board. \_\_\_\_\_

Signature of Awards Board Chairman. \_\_\_\_\_

Approved  Denied Signature of the Chief of Police \_\_\_\_\_