

CJTC 1915: Agency Report

Pursuant to RCW 43.101.135 and WAC 139-06-020, this form must be submitted to the Washington State Criminal Justice Training Commission (WSCJTC) within 15 days of the following "occurrences":

- Agency learns of use of force that causes serious injury or death,
- Agency learns that officer has been charged with a crime,
- Agency makes an initial disciplinary decision for any misconduct listed in <u>RCW 43.101.105</u>.

Notes:

- See WAC 139-01-310(31) and RCW 9A.04.110(4)(b) and (c) for the definition of "serious injury".
- "Date of Incident" is the date the alleged misconduct occurred. "Date of Occurrence" is the date the agency: 1) learned of the use of force; 2) learned of the criminal charges; or 3) made an initial disciplinary decision.
- List all ongoing and completed criminal and administrative investigations by agency and case/incident number.

Submission via Kaseware Web Portal						
Section 1: Officer's Information						
FULL Legal Name (Last, First Middle):		А	Acadis ID:		Gender Identity:	
					☐ Male ☐ Female ☐ X	
Agency:			Hire Date (MM/DD/YYYY):		Certification type:	
Section 2: Occurrence Details:						
Occurrence Type:	Date of Occurre	Date of Occurrence:		Date of Incident		
Is there an ongoing investigation related to the occurrence?					Yes 🗌 No 🗌	
Which agency or team is investigating?			Case/incident number			
Are there previous sustained findings for the same type of behavior?					Yes No No	
Is the officer on administrative leave?					Yes No No	
Brief factual summary						
Section 3: This section must be signed by the agency head or designee.						
I understand that the WSCJTC will rely on the information provided in Section 2 for matters pertaining to officer certification, and I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.						
Signed this day of	<u>,</u> 20, in					_, Washington.
Signature						
Printed/Typed Name:	Rank/Title:	Contac	act Email: Contact Phone:		one:	
				T		