



PUBLIC SAFETY LIAISON COMMITTEE

Complaint against the Grand Valley State University Police Department,
or an Officer or Officers of that Department.

The Grand Valley State University Public Safety Liaison Committee ("Committee") is an oversight committee for the Grand Valley State University Police Department, created under the authority of Act 120 of the Public Acts of 1990 of the State of Michigan. The primary function of the Committee is to consider grievances by persons against police officers or the Police Department arising out of acts or omissions of such officers or the Department. The Committee may prepare and make recommendations concerning such grievances, including recommendations for disciplinary measures against a police officer who was found responsible for misconduct in the office.

The Committee encourages the complainant to first attempt informal resolution of any dissatisfaction you may have by working with the Grand Valley State University Police Department. If you are unable to satisfactorily resolve the matter on an informal basis, or if you do not wish to do so, you may submit your formal grievance by completing the following grievance form.

How can we reach you?

LAST NAME	FIRST NAME	MIDDLE INITIAL
CELL PHONE	HOME PHONE	WORK PHONE
ADDRESS		
EMAIL		FAX NUMBER
THROUGH A FRIEND, ROOMMATE OR RELATIVE? PLEASE LIST THEIR INFORMATION BELOW.		

FOR OFFICE USE ONLY:

Complaint received: ☐ IN WRITING ☐ IN PERSON ☐ BY TELEPHONE

AT _____ A.M./P.M., _____, _____, _____
DAY MONTH YEAR

BY _____ / _____
NAME SIGNATURE

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(Continue on the back or attach an additional sheet of paper if necessary.)

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

WHO WAS INVOLVED?

Can you describe the officer(s)? _____

Do you know their badge number(s)? _____

Do you know of any witnesses to this incident or incidents? If so, please give us their names, addresses and telephone number, if you are able. If not, please describe them. How old were they? What do they look like? Are they male or female? (Continue on the back of this sheet if necessary.)

Witness #1

Witness #2

Witness #3

Thank you for coming to us with this information. A copy of your complaint will be mailed to you, for your records, at the address you gave us. Also, someone from the Public Safety Liaison Committee will call you within the next five working days to tell you how the Committee will handle your complaint.