MARQUETTE UNIVERSITY POLICE DEPARTMENT
CITIZEN COMPLAINT FORM

All citizen complaints will be courteously accepted and fully investigated. All investigations arising from citizen complaints will be conducted in a fair and open manner, consistent with the rights of all concerned, and in a manner aimed at determining the facts of the action.

Complainant Notification of 946.66 (2): Whoever knowingly makes a false complaint regarding the conduct of a law enforcement officer is subject to a Class A forfeiture.

_________________________________ ____________________________
Acknowledgement of Notice – Signature  Date Notice Acknowledged

NAME:  ___________________________________________________________
Print full Name

ADDRESS:  _______________________________________________________

CITY:  ________________________ STATE: _________   ZIP: ____________

PHONE:  ______________________ ALT. PHONE:  _____________________

DATE OF INCIDENT:  __________________  TIME OF INCIDENT:  __________

LOCATION OF INCIDENT:  ____________________________________________

Nature of complaint:  _____________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

_________________________________ _____________________
Complainant Signature Date

Continue on reverse if necessary