East Lansing Police Department Complaint Form

You may use this form to file a complaint. We encourage you to provide as much information as possible. It is helpful to investigators to be able to follow up on information or speak to people involved in the incident to gather evidence. Please do not use this form to report crimes.

Please check the box if you would like to file the complaint anonymously. ☐

Your Information

________________________________________________________________________
Name (First & Last; or Organization Name)

________________________________________________________________________
Address 1 _______________________________________________________________

________________________________________________________________________
Address 2 _______________________________________________________________

City _________________________ State ________ ZIP______________

________________________________________________________________________
Phone Number ____________________  Email _________________________________

Information about the Incident:

Location (address, street intersection):_________________________________________

_______________________________________________________________________
Date: ___________________________ Time: _________________

Name of ELPD Officer(s)/Employee(s) (if known)

_______________________________________________________________________
_______________________________________________________________________

Name of Witness(es) or Others Involved

_______________________________________________________________________
_______________________________________________________________________

Witness Phone or Email

________________________________________________________________________
Statement/Description of Incident

Do you have photographs or video relevant to this incident?

☐ Video
☐ Photos
☐ Other documents (additional statement)

Documents can be downloaded to this form, here:

**Please enter a description of the incident** (If more space is needed, please attach additional statement above.)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Please explain what you want to see happen as a result of this complaint:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Providing the following information about yourself is helpful to the East Lansing Independent Police Oversight Commission, but is not required:

**Gender** (voluntary):

Please list what gender you identify as: _______________________________________

Decline:  

**Age** (voluntary):

____________________________________

**Racial/Ethnic Background** (voluntary):

Please list what race/ethnic background(s) you identify as: ______________________

________________________________________________________________________

Decline:  
Important Public Records Information
Information submitted in this form is subject to public disclosure.

The East Lansing Independent Police Oversight Commission exists to ensure professional and accountable law enforcement for the citizens of East Lansing. Honest feedback is essential to maintaining a police department that is both trustworthy and responsive to the community. Therefore, it is critical that truthfulness be maintained in the filing and investigation of complaints against the police.

Truth and Accuracy
I certify that the information contained on this form is accurate and complete to the best of my knowledge. I understand that all information disclosed on this form will be available to the public.

Signature: Date:

The individual filing this complaint chooses not to record the complaint information; therefore, I am recording their statement on their behalf.

Name of Employee (Printed): Date

INFORMATION BELOW THIS LINE IS COMPLETED INTERNALLY

Received by: Name & Title Date

ELPD: Name & Title Date

ELIPOC: Name & Title Date

Complaint Number (for tracking purposes): 

Disciplinary Complaint ☐ Policy Complaint ☐