

COMPLAINT FORM

(to be submitted by the person making a complaint under the PEI Police Act)

Your information:

- Name: _____
- Address: _____
- Telephone(s): _____
- Email: _____

Name of Security Police Officer, University of Prince Edward Island (if known)

Date of the incident: _____ day of _____, 20_____
(Day) (Month) (Year)

Please describe your complaint:

(Attach additional paper if needed to describe your complaint)

Dated this _____ day of _____, 20_____
(Day) (Month) (Year)

Signature of person making complaint

(Reminder: you must sign the complaint)

If acting on behalf of an eligible complainant, please provide the name of the person for whom you are acting and your relationship to that person.

Name of person for whom you are acting

Relationship of the directly affected person to you

Once completed, send this form to the appropriate police service:

Manager
Office of the Police Commissioner
114 Kent Street
PO Box 427
Charlottetown, PEI
C1A7K7
Telephone: (902) 368-7200
or 1-800-877-541-7204
Facsimile: (902) 368-1123