Village of Rantoul Police Department
Citizen Complaint Appeal Form

CONTROL NUMBER

Use this form to appeal the Police Chief's finding in regards to your complaint. You **have a right to appeal the decision within thirty (30) days of receiving the notice.** The Office of the Mayor will hold an appeals hearing within forty-five (45) days. You will receive written notice via certified mail of this hearing date at least ten (10) business days prior to the hearing.

NAME (LAST, FIRST, MIDDLE)	**DATE OF BIRTH**
HOME ADDRESS (STREET, CITY, STATE, ZIP)	

HOME PHONE	**WORK PHONE**	**CELL PHONE**

INCIDENT CASE NUMBER (IF KNOWN)	**INCIDENT DATE / TIME**

PLEASE BRIEFLY DESCRIBE WHY YOU BELIEVE THE CHIEF'S DECISION WAS WRONG.

COMPLAINANT SIGNATURE	**DATE**