## **Our Jurisdiction:**

The Vermont Criminal Justice Council (VCJC) Professional Regulation Subcommittee (PRS) and the VCJC Executive Director accept from any source complaints of unprofessional conduct against Vermont law enforcement officers, including agency heads. You may submit such a complaint as described below.

If your complaint alleges conduct that meets the statutory definition of unprofessional conduct and is deemed credible, the VCJC Executive Director will forward your complaint to the officer's employing agency for investigation; or, in limited circumstances, the PRS will undertake an investigation itself. By law, the VCJC Executive Director must refer most complaints related to an officer (who is not the agency head) to the officer's employing agency for investigation. Please note that the PRS does not have the authority to investigate allegations of misconduct against individuals who do not receive a certification from the VCJC, such as employees of the Department of Corrections (DOC).

## How to file a complaint:

The VCJC PRS accepts complaints from any source by mail and/or by using the online form.

Mail:

**Executive Director** 

Vermont Criminal Justice Council

317 Academy Rd.

Pittsford, VT 05763

Electronic: Complete and submit the form online at <a href="https://vcjc.vermont.gov/form/professional-regulation-complain">https://vcjc.vermont.gov/form/professional-regulation-complain</a>

If you elect to submit your complaint online and would like to submit additional documentation, you may do so by mailing your printed online complaint along with the supporting documentation to the address provided above.



Please enter your contact information below. You do not have to enter this information to submit a complaint; but if you would like confirmation of the VCJC's receipt of this complaint Complainant Full Name: Date: Address: Phone: Email Address: Who do you have a complaint against? Name /Agency City/Town **Complaint Description** Date and time of offense: Description of events:

Witness Information
Full Name:
City/Town
Email:
Phone:
Witness Information
Full Name:
City/Town
Email:
Phone:
Witness Information
Full Name:
City/Town
Email:
Phone: