



REQUEST FOR DISCLOSURE OF POLICE RECORDS

MSU Police Department does NOT release copies of active/open reports

REQUESTOR DETAILS

Title <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.		Last Name		First Name		Middle Name	
Date of Birth	Street Address		Apt.#	City	State	Zip Code	Phone Number
Driver License Number	Issuing State	E-mail address		Method of Delivery for Report <input type="checkbox"/> Pick-up at MSU Police <input type="checkbox"/> U.S. Mail <input type="checkbox"/> E-Mail			

Requesting:	Report Number
<input type="checkbox"/> A copy of an adjudicated report, i.e., closed or dismissed cases	
<input type="checkbox"/> A local criminal history ("background") check*	
<input type="checkbox"/> A copy of a private property traffic crash	
<input type="checkbox"/> Letter of confirmation for lost, damaged or stolen property, i.e., case is still open	

*If background check, select reason for the request

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Employment | <input type="checkbox"/> Study Abroad Program |
| <input type="checkbox"/> Court | <input type="checkbox"/> Attorney |
| <input type="checkbox"/> ASMSU | <input type="checkbox"/> Other (please explain) <input type="text"/> |

I understand and agree by my signature to this request that the MSU Police Department has up to fifteen (15) business days to respond to my request.

I also understand and agree to pay/have paid a processing fee, which does not guarantee I will receive a copy of the requested report.

X	
Requestor's Signature	Date Signed

DO NOT WRITE BELOW THIS LINE

Date Received	ID Verified By Cadet? <input type="checkbox"/> Yes <input type="checkbox"/> No	Fee Collected By	Amount	Method of Payment <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Other
Special Instructions				

FOR MICHIGAN STATE UNIVERSITY RECORDS OFFICE USE

Date Received	Request Received By	Initials	Disposition By	Disposition Date	Follow-Up	Date
Reason for Disposition						
<input type="checkbox"/> Does not meet criteria for release under department policies	<input type="checkbox"/> No record of arrest or charges					
<input type="checkbox"/> Copy of report available for Defense Counsel at Prosecutor's Office	<input type="checkbox"/> Requestor's copy provided					