

**REQUEST FOR REVIEW OF DISCIPLINE
(REPRIMANDS AND SUSPENSIONS FROM ONE (1) TO TEN
(10) DAYS)**

BUREAU OF INTERNAL AFFAIRS/
CIVILIAN OFFICE OF POLICE ACCOUNTABILITY
CHICAGO POLICE DEPARTMENT

SUPERVISOR PRESENTING TO ACCUSED:

NAME	STAR NO.
SIGNATURE	
DATE	TIME

NAME	STAR NO.	LOG NO.	NOTE: IF THE ACCUSED INTENDS TO USE THE 10 DAY OPTION, MAKE A COPY OF THE ORIGINAL REQUEST FORM AND SEND THE COPY TO BIA OR COPA WITH THIS BOX ONLY COMPLETED. WHEN THE ACCUSED MAKES AN ELECTION ON THE ORIGINAL FORM, SEND THE COMPLETED ORIGINAL TO BIA OR COPA. <input type="checkbox"/> BY INITIALIZING THIS BOX I ACKNOWLEDGE THAT BY NOT MAKING AN ELECTION WITHIN 10 DAYS AND RETURNING THIS FORM TO BIA OR COPA WILL BE DEEMED AN ACCEPTANCE OF THE PENALTY.
VIOLATION OF RULE NO(S).	PENALTY		

NOTE: AN ACCUSED MEMBER HAS TEN (10) WORKING DAYS TO CHOOSE ONE OF THE FOLLOWING OPTIONS. IN THE EVENT THE ACCUSED DOES NOT MAKE AN ELECTION WITHIN TEN (10) WORKING DAYS THE PENALTY WILL BE DEEMED ACCEPTED.

ACCEPTANCE OF PENALTY

I accept the above penalty and waive my right to a review of the penalty.

ELECT TO FILE A GRIEVANCE SEEKING BINDING SUMMARY OPINION. I WILL SUBMIT THE APPROPRIATE GRIEVANCE REPORT WITHIN THE TIME PARAMETERS DELINEATED IN MY COLLECTIVE BARGAINING AGREEMENT.

Sworn represented members **SHALL NOT** be required to serve the suspension until such time as the arbitrator's award is received.

SIGNATURE _____ **DATE & TIME** _____
(ACCUSED MEMBER)

The supervisor presenting this form will note the date and time of presentation to the accused in the upper right hand corner. The supervisor will sign (and date/time) the form when an election is made and immediately forward the original to BIA or COPA and give the copy to the accused. If the accused intends to use the 10 day option, make a copy of the original request form and send the copy to BIA or COPA.

The accused will make an election and sign (and date/time) the form. If the accused refuses to sign the form, the presenting supervisor will mark the form "Refused", sign, and forward it to the Bureau of Internal Affairs/Civilian Office of Police Accountability. **A REFUSAL TO SIGN WILL BE DEEMED AN ACCEPTANCE OF THE PENALTY IF THE ACCUSED FAILS TO MAKE AN ELECTION WITHIN TEN (10) WORKING DAYS.**

SIGNATURE _____ **DATE & TIME** _____
(SUPERVISOR/WITNESS)

NOTE: AN ACCUSED MEMBER HAS TEN (10) WORKING DAYS IN WHICH TO MAKE AN ELECTION FROM THE OPTIONS ABOVE AND RETURN FORM TO THE BUREAU OF INTERNAL AFFAIRS OR THE CIVILIAN OFFICE OF POLICE ACCOUNTABILITY.