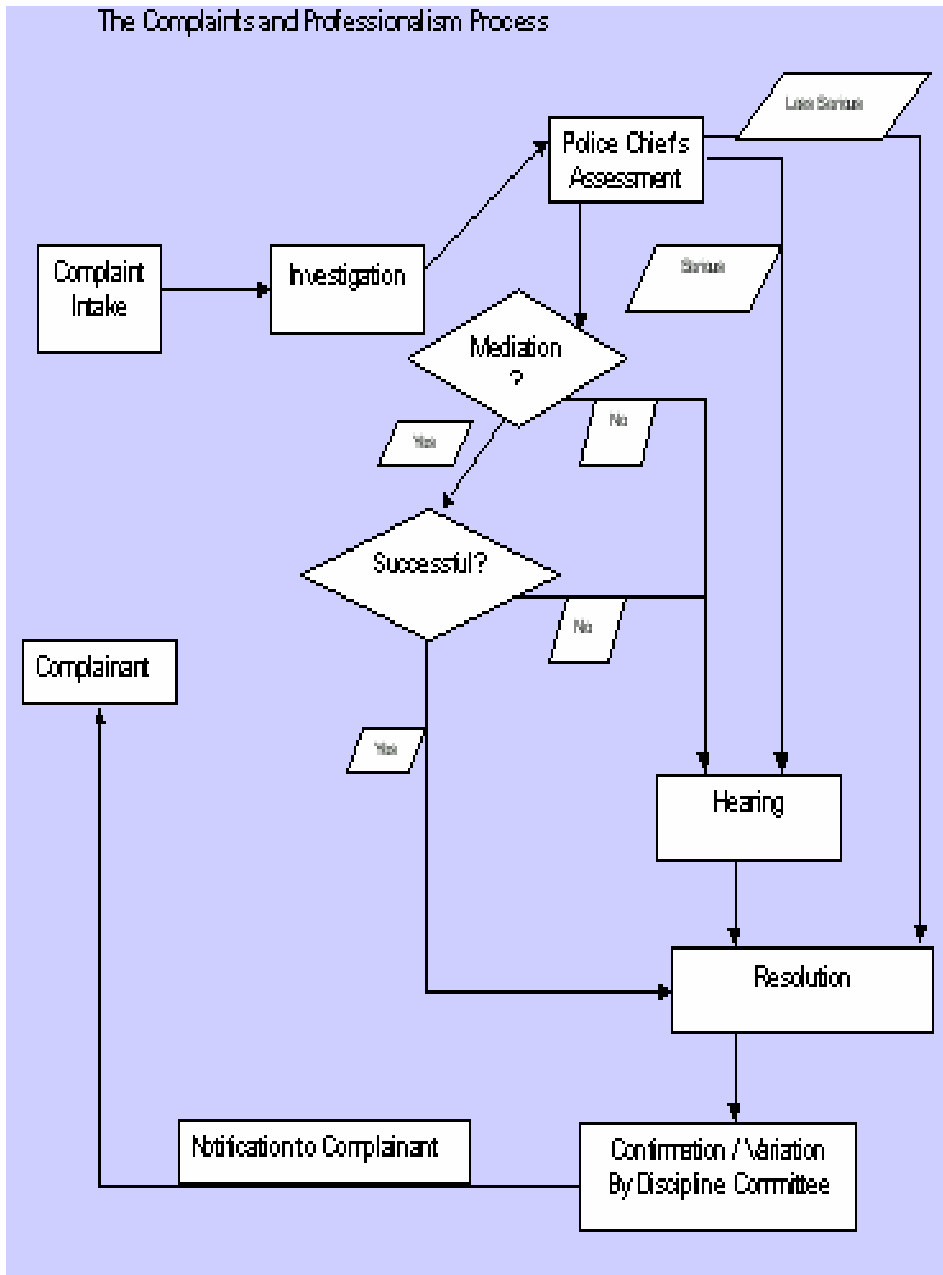


Anishinabek Police Service

Discipline Process Schematic





ANISHINABEK
POLICE SERVICE

NOTICE OF HEARING

PURSUANT TO THE CODE OF CONDUCT

TO: _____

It is alleged that your conduct on _____ constitutes
_____, contrary to the Code of Conduct of the
Anishinabek Police Service, as amended.

THAT YOU DID:

This is therefore to command you to appear before _____

On _____, the ___ day of _____, 2003, at _____ o'clock in the
_____ noon, at _____ to answer to the allegation(s).

Dated this _____ day of _____, 20__.

(Police Chief)

True copy served on _____ this ___ day of _____, 20__ at
_____ o'clock in the _____ noon.

(Signature - Person affecting service)

NOTE: This hearing is held pursuant to the Code of Conduct and Professionalism of the Anishinabek Police Service. If you do not attend at the time and at the location indicated above to answer to the allegation(s), the tribunal may proceed in your absence and you will not be entitled to any further notification of the proceedings.

Copy Received: _____
(Employee signature)



Anishinabek Police Service

Record of Disciplinary Proceedings

Subject Officer: _____

Allegation(s): _____

Date of First Appearance: _____

Prosecutor: _____

Defence Counsel: _____

Presiding Official: _____

Appearances:

Date: _____ **Action:** _____ **Set Date:** _____

Comments: _____

Date: _____ **Action:** _____ **Set Date:** _____

Comments: _____

Date: _____ **Action:** _____ **Set Date:** _____

Comments: _____



Anishinabek Police Service

Disposition Record

Subject Officer: _____

Allegation(s): _____

Date of First Appearance: _____

Prosecutor: _____

Defence Counsel: _____

Presiding Official: _____

Disposition Information:

Prosecution Position: _____

Defence Position: _____

Disposition: _____

Presiding Official: _____
Name **Signature**

Date: _____

**The Anishinabek Police Service
Disposition Review
By Discipline Committee**

File Number: _____ Subject Officer: _____ First Nation: _____
(Surname, Initials)

Date of Event(s): _____ Process Date: _____ Date of Disposition: _____

Disposition Type: Informal () A.D.R. () Pre-hearing: () Hearing: ()

If Pre-hearing or Hearing, Presiding Official: _____

Date of Review: _____ Allegation(s): _____

Complainant: _____
(Surname, Initials)

First Nation: _____

Allegation(s): _____

Disposition(s): _____

Endorsed: Yes () No () If No, state reasons:

(use additional page(s) if required)

Substitute Disposition: _____

Date: _____

(signed) For Discipline Committee

Police Chief Notified: _____
(date)

Complainant Notified: _____
(date)

**Application to Appeal
To
The Police Governing Authority**

Applicant Information:

Surname: _____ Given Name: _____

Address: _____ Phone: () _____

Counsel/Agent: _____ Phone: () _____

Date of Event(s) _____ Date of Application: _____

Reason for Appeal Application:

No evidentiary basis: ()

Violation of Procedural Fairness: ()

Other () specify: _____

Brief Synopsis of the essence of the Appeal Application:

(Attach additional page(s) if required)

File Number: _____

Date Received: _____

Application Approved? Yes () No ()

(signed)

Date

for the A.P.S.
Governing Authority

