



# BRIDGEWATER POLICE DEPARTMENT Citizens Police Academy Application Form



NAME: L: \_\_\_\_\_ F: \_\_\_\_\_ MI: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: H#: \_\_\_\_\_ W#: \_\_\_\_\_ Cell#: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

HAVE YOU EVER BEEN KNOWN BY ANY OTHER NAME? Yes or No

IF YES, WHAT NAME(S): \_\_\_\_\_

CURRENT OCCUPATION: \_\_\_\_\_

CURRENT EMPLOYER(S): \_\_\_\_\_

\_\_\_\_\_

HAVE YOU EVER LIVED IN ANY OTHER STATE? Yes or No

IF YES, WHERE AND HOW LONG? \_\_\_\_\_

\_\_\_\_\_

REASON(S) FOR ATTENDING THE CITIZENS POLICE ACADEMY: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ARE YOU RELATED TO ANYONE IN LAW ENFORCEMENT? Yes or No

IF YES, WHO AND WHERE ARE THEY EMPLOYED? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU EVER HAD ANY CONTACT WITH A MEMBER OF THE BRIDGEWATER POLICE DEPARTMENT, OR ANY OTHER LOCAL, STATE OR FEDERAL AGENCY FOR ANY REASON INCLUDING A TRAFFIC STOP, TO REPORT CRIMINAL ACTIVITY, CALL FOR ASSISTANCE, ETC? Yes or No

IF YES, PLEASE EXPLAIN: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME? (Felony or Misdemeanor)  
Yes or No

IF YES, FOR WHAT CRIME, WHERE, AND WHEN: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU EVER BEEN ARRESTED, CHARGED, OR BEEN A SUSPECT IN A CRIME?  
Yes or No

IF YES, FOR WHAT CRIME OR INCIDENT, WHERE AND WHEN?: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU EVER BEEN TAKEN INTO CUSTODY BY A LAW ENFORCEMENT OFFICER FOR ANY REASON? Yes or No

IF YES, FOR WHAT REASON, WHERE AND WHEN? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Please return or email completed application form to:

Sgt. Thomas LaGrasta  
BRIDGEWATER POLICE DEPARTMENT  
220 Pleasant Street  
Bridgewater, MA 02324  
tlagrasta@bridgewaterma.org