

BRIDGEWATER POLICE DEPARTMENT Citizens Police Academy Application Form



NAME: L:	F:			MI:
ADDRESS:				
EMAIL:				
PHONE: H#:				
DATE OF BIRTH:				
HAVE YOU EVER BEEN KNOW IF YES, WHAT NAME(S):	· · · · · · · · · · · · · · · · · · ·			
CURRENT OCCUPATION:				
CURRENT EMPLOYER(S):				
HAVE YOU EVER LIVED IN AN	NY OTHER STA	ТЕ? Үе	s or	No
IF YES, WHERE AND HOW LO	NG?			
REASON(S) FOR ATTENDING	THE CITIZENS I	POLICE AC	ADEMY	:

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 DEPARMTMENT, 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:

Officer Ryan O'Connell BRIDGEWATER POLICE DEPARTMENT 220 Pleasant Street Bridgewater, MA 02324 roconnell@bridgewaterma.org