Application Checklist

Have you included?

(  ) Completed Application form
(  ) Birth Certificate
(  ) Recent photograph (besides photo on drivers license)
(  ) Signed Ride Along Waiver
(  ) Driver's License
(  ) Current copy of Vehicle Registration
(  ) Current copy of proof of Auto Insurance
(  ) Signed Waiver for Release of Information
(  ) Signed Background Investigation Discovery Waiver
(  ) A one page sheet telling us about yourself and including any information you feel would be beneficial to us in our assessment.
MURRIETA POLICE DEPARTMENT
24701 Jefferson Avenue
Murrieta, CA 92562

Volunteer Application

Date __________________________

Name __________________________ (Last) (First) (Middle)

Address ___________________________

City ___________________________ Zip Code ___________________________

Telephone Number ___________________________ Email Address ___________________________

Driver's License Number ___________________________ Social Security Number ___________________________

Date of Birth ___________________________

Sex ___________________________ Height ___________________________ Weight ___________________________

Blood Type ___________________________ Hair Color ___________________________ Eye Color ___________________________

Race ___________________________ Complexion ___________________________

Any Physical Marks ___________________________

Spouse's name (and address if different from above) ___________________________

Address ___________________________

City and Zip Code ___________________________ Phone ___________________________

Former Spouse (if married previously) ___________________________

Address ___________________________

City and Zip Code ___________________________ Phone ___________________________

Emergency Contact

Name ___________________________

Address ___________________________

City and Zip Code ___________________________

Telephone Number ___________________________ Relationship ___________________________
Personal History Information

How long have you lived in the City of Murrieta? _______________________

How long have you lived in the County of Riverside ______________________

If you moved to Murrieta less than ten years ago, please give your prior address:

Street Address __________________________

City __________________________ State _____ Zip Code ______

Name of Police Agency that serviced that area: __________________________

Address __________________________

City __________________________ State _____ Zip Code ______

Telephone Number (include area code) __________________________

Do you wear corrective lenses? _____ If yes, what is your vision uncorrected? ______

Family Physician:

Name __________________________

Address __________________________

Telephone Number _____________ Date of your last physical exam _____________

Hospital Preference __________________________ City __________________________

Medical Insurance Group __________________________ I.D.# __________________________

Have you experienced an allergic reaction to any substance? Yes _____ No _____

If yes, what substance if known? __________________________

Please explain circumstance ___________________________________________

Please list any handicaps you have which may limit your participation in Department activities or functions. ___________________________________________

I hereby certify that all statements in this personal history statement are true and complete to the best of my knowledge and I understand that any misstatements of material facts will subject me to disqualification.

Signature __________________________ Date __________________________
Employment History

If currently employed

Place of employment __________________________
Business mailing address __________________________

Telephone # __________ Your position __________
Hire date __________ Supervisor’s name __________
List days and hours you work __________________________
Brief job description __________________________

If retired

Last place of employment __________________________
Business mailing address __________________________

Telephone # __________ Your position __________
Employment dates __________ Full or part time __________
Supervisor’s name __________________________
Brief job description __________________________

List your previous employers for the past ten years

Place of employment __________________________
Business mailing address __________________________

Telephone # __________ Your position __________
Employment dates __________ Full or part time __________
Supervisor’s name __________________________
Brief job description __________________________
Employment History (continued)

Place of employment ____________________________
Business mailing address __________________________

__________________________  Your position __________________________
Telephone # ____________________________  Full or part time __________________________
Employment dates ____________________________
Supervisor’s name ____________________________
Brief job description ____________________________

__________________________  Your position __________________________
Telephone # ____________________________  Full or part time __________________________
Employment dates ____________________________
Supervisor’s name ____________________________
Brief job description ____________________________

__________________________  Your position __________________________
Telephone # ____________________________  Full or part time __________________________
Employment dates ____________________________
Supervisor’s name ____________________________
Brief job description ____________________________

(Continue on a separate sheet of paper if required)
Personal References

Please list four personal references (other than relatives) who have known you well. Our background investigator will contact these references.

Reference 1
Name
Address
City State Zip code
Telephone Number Years known
Occupation

Reference 2
Name
Address
City State Zip code
Telephone Number Years known
Occupation

Reference 3
Name
Address
City State Zip code
Telephone Number Years known
Occupation

Reference 4
Name
Address
City State Zip code
Telephone Number Years known
Occupation
MURRIETA POLICE DEPARTMENT

Date: ____________________

Name of Applicant ____________________ (Please Print)

Position Applied for ____________________

PRE-INVESTIGATIVE QUESTIONNAIRE

As an applicant for a position with the City of Murrieta Police Department, you are required to complete the following Pre-Investigative Questionnaire as part of your background. Answer all questions.

As part of the questionnaire, you are admonished with the following:

"I hereby certify that all statements and answers made on this questionnaire are true and complete, and I understand that any misstatements of material facts, withholding of any information, or deception of any kind, will subject me to disqualification or dismissal."

Do you understand this admonishment? Yes____ No____

Do you have any questions about this admonishment? Yes____ No____

Applicant Signature ____________________ Date __________

Witness Signature ____________________ Date __________
CRIMINAL AND ARREST INFORMATION

Read and answer the following questions carefully and honestly. Any answers marked "Yes" will require an explanation on the attached explanation form(s), except those marked with an *. Answers are subject to verification by a Polygraph Examination.

Have you ever committed any of the following acts?

1. Arson (intentionally set a fire)  Yes___ No___
2. Burglary (entry of a structure or vehicle to commit theft or other crime)  Yes___ No___
3. Robbery (theft from another person utilizing a weapon or force)  Yes___ No___
4. Homicide  Yes___ No___
5. Theft  Yes___ No___
6. Forgery  Yes___ No___
7. Kidnapping  Yes___ No___
8. Extortion (blackmail)  Yes___ No___
9. Embezzlement (theft of money or other valuables entrusted to you)  Yes___ No___
10. Rape (sexual intercourse by force)  Yes___ No___
11. Child Abuse  Yes___ No___
12. Child molestation (any sex act with a child)  Yes___ No___
13. Bestiality (any sex act with an animal)  Yes___ No___
14. Prostitution (intercourse for money or other considerations)  Yes___ No___
15. Soliciting prostitution (asking for sex in return for money or vice versa.)  Yes___ No___
16. Soliciting a lewd act in a public place  Yes___ No___
17. Pimping (Deriving support from a prostitute)  Yes___ No___
18. Pandering (encouraging another to be a prostitute)  Yes___ No___
19. Have you ever been arrested for an illegal act?  Yes___ No___

Page 2 of 13
20. Have you ever had sex with a member of your family (excluding spouse)?
   Yes___ No___

21. Have you in the past or do you now regularly associate with persons whom you know to have engaged in and/or been arrested for unlawful sexual activity?
   Yes___ No___

22. Have you committed any forcible sex act (sodomy, oral copulation, etc.)?
   Yes___ No___

23. Any violent assault upon another
   Yes___ No___

24. Assault upon spouse, ex-spouse or someone you had a relationship with.
   Yes___ No___

25. What is your true first name?
   ____________________________

26. What is your true last name?
   ____________________________

27. Do these names appear on your birth certificate?
   *Yes___ No___

28. What is your true date of birth?
   ____________________________

29. Have you ever before been asked to submit to a polygraph examination?
   Yes___ No___

30. Has the fact that you want this job caused any conflict with your family?
   Yes___ No___

31. Have you ever failed to pass a polygraph examination?
   Yes___ No___

32. Have you placed any false information on your employment application or personal history background forms?
   Yes___ No___

33. Have you deliberately omitted any information on your employment application or personal history background forms?
   Yes___ No___

34. When you left high school, did you receive a graduation diploma?
   *Yes___ No___
   a. Do you have a GED?
   *Yes___ No___
   b. Have you passed the high school equivalency examination?
   *Yes___ No___

35. Would you have any reason to be concerned about an investigation into your past work records?
   Yes___ No___

36. Were you ever fired from a job?
   Yes___ No___

Page 3 of 13
37. Were you ever asked to resign from a job?  

Yes___ No___

38. Did you ever leave a job to avoid being fired?  

Yes___ No___

39. Have you shown the true and complete reasons for leaving each of your previous jobs?  

Yes___ No___

40. Did you ever leave any job with hard feelings toward the management or co-workers?  

Yes___ No___

41. Do you think you could return to work for all of your former employers? If no, explain.  

*Yes___ No___

42. In the past year, how many times have you been late for work?__________

43. In the past year, how many days of work have you missed for reasons other than illness?__________

Yes___ No___

44. Have you ever worked for any other law enforcement agency in any capacity?  

Yes___ No___

45. Have you ever applied at any other law enforcement agency for any type of job?  

Yes___ No___

46. Have you ever been turned down as unacceptable by any other law enforcement agency?  

Yes___ No___

47. Were you ever turned down as unacceptable by the military or a draft board?  

Yes___ No___

48. Are you currently registered for the draft?  

*Yes___ No___

49. Have you ever served in any branch of the Armed Forces? (If no, skip to Question 56)  

Yes___ No___

50. Would you have any reason to be concerned about an investigation into your military record?  

Yes___ No___

51. While in the service, were you ever placed under military arrest?  

Yes___ No___

52. While in the service, were you ever court marshaled?  

Yes___ No___

53. While in the service, did you receive any type of disciplinary action?  

Yes___ No___

54. While in the service, were you ever reduced in grade or rank?  

Yes___ No___

55. While in the service, were you ever AWOL?  

Yes___ No___
56. Would you have any reason to be concerned about an investigation into your arrest record?  

Yes___ No___

57. As a juvenile, were you ever arrested or cited?  

Yes___ No___

58. As an adult, were you ever arrested or detained?  

Yes___ No___

59. Have you ever petitioned any court to seal or expunge a criminal or juvenile record?  

Yes___ No___

60. Have you ever had a warrant issued for your arrest?  

Yes___ No___

61. Are you now wanted for any reason by any law enforcement agency?  

Yes___ No___

62. Have you ever been a suspect in a crime?  

Yes___ No___

63. Have you ever been charged with a crime?  

Yes___ No___

64. Other than minor traffic matters, have you ever been fined by a court?  

Yes___ No___

65. Have you spent any time, either as a juvenile or an adult, locked up in a jail?  

Yes___ No___

66. Since you were 18 years old, have you ever shoplifted anything from a store?  

Yes___ No___

67. Have you ever falsified an income tax form?  

Yes___ No___

68. Have you ever falsified an insurance claim?  

Yes___ No___

69. Have you ever committed fraud by collecting unemployment or welfare benefits (including food stamps) when you were not entitled to?  

Yes___ No___

70. Have you ever stolen a motor vehicle?  

Yes___ No___

71. Have you ever been sent to jail over anything involving a motor vehicle?  

Yes___ No___

72. Since you were 18 years old, have you committed any serious undetected crime?  

Yes___ No___


Yes___ No___

74. Have you, within the past ten years, done anything at all that you could have been arrested for doing?  

Yes___ No___
75. Would you have any reason to be concerned about an investigation into your moral background? Yes__ No__

76. Since you were 16 years old, have you committed any type of sexual crime? Yes__ No__

77. Since you were 16 years old, have you thought about committing some type of sexual crime? Yes__ No__

78. Have you ever paid for sex? Yes__ No__

79. Have you ever received any type of payment for sex? Yes__ No__

80. Have you ever sexually molested a child? Yes__ No__

81. Have you ever committed a sexual act in public? Yes__ No__

82. Would you have any reason to be concerned about an investigation into your use of illegal drugs? Yes__ No__

83. Have you ever smoked or used marijuana in your life? Yes__ No__

84. Within the past 3 years, have you smoked marijuana? Yes__ No__

85. Of your knowledge, do any of your present circle of friends and acquaintances use any type of narcotic, pills or drugs? Yes__ No__

86. Within the past year, have you been in the presence of anyone else using illegal drugs? Yes__ No__

87. Have you ever illegally purchased any type of narcotic, pill or drug? Yes__ No__

88. Have you ever sold any type of narcotic, pill or drug? Yes__ No__

89. Have you ever cultivated marijuana? Yes__ No__

90. Have you ever been involved in the manufacture of any drug? Yes__ No__

91. Have you ever been the "middle man," a "go-between," or "done a favor for a friend" by becoming involved in an illegal drug transaction? Yes__ No__

92. Has anyone other than a medical person injected anything into your body? Yes__ No__
93. Is someone you are currently living with keeping any illegal drugs or substances at your residence?  
   Yes___ No___

94. In the past three years, has someone you have lived with kept illegal drugs or illegal substances at your residence?  
   Yes___ No___

95. Have you ever stolen alcohol?  
   Yes___ No___

96. Do you object to others using narcotics or drugs?  
   Yes___ No___

97. Would you have any reason to be concerned about an investigation into your honesty?  
   Yes___ No___

98. Have you ever stolen any money from a place where you worked?  
   Yes___ No___

99. Have you ever borrowed money from an employer and not paid it back?  
   Yes___ No___

100. Have you ever embezzled any money from an employer?  
    Yes___ No___

101. Have you ever had a debt turned over to a collection agency?  
    Yes___ No___

102. Have you ever been late paying rent?  
    Yes___ No___

103. Has your salary ever been attached for non-payment of debts?  
    Yes___ No___

104. Have you ever had purchased goods repossessed?  
    Yes___ No___

105. Have you ever filed bankruptcy?  
    Yes___ No___

106. Have you ever avoided paying any lawful debt by moving away?  
    Yes___ No___

107. Have you ever been late in paying your taxes?  
    Yes___ No___

108. Have you ever been late in making child support payments?  
    Yes___ No___

109. Have you ever been late in re-paying a student loan?  
    Yes___ No___

110. Have you had a check “bounce” within the past three years?  
    Yes___ No___

111. Have you ever borrowed money to gamble with?  
    Yes___ No___

112. Have you ever borrowed money to pay a gambling debt?  
    Yes___ No___
113. What is the most you have ever lost by gambling at one time? $__________
Won by gambling at one time $__________

114. Do you feel you now have a problem with gambling? Yes___ No___

115. Have you ever been a plaintiff or defendant in any civil court action? Yes___ No___

116. Do you presently have any civil actions pending in court? Yes___ No___

117. Would you have any reason to be concerned about an investigation into your drinking habits? Yes___ No___

118. Do you drink some type of alcoholic beverage? Yes___ No___

119. Have you ever done anything illegal after drinking alcohol? Yes___ No___

120. Would you have any reason to be concerned about an investigation into your driving habits? Yes___ No___

121. How many traffic citations have you received in your life? __________

122. Have you ever had a warrant issued for your arrest? Yes___ No___

123. Have you ever had a traffic citation that did not show on your California DMV printout? Yes___ No___

124. Have you ever been the driver in any traffic accident? Yes___ No___

125. Has your driver's license ever been suspended or revoked? Yes___ No___

126. Has your auto insurance ever been placed in the assigned risk pool? Yes___ No___

127. Has your auto insurance ever been canceled for cause? Yes___ No___

128. Do you now have auto insurance required by the State of California? Yes___ No___

129. Since being licensed to drive, has there ever been a time when you did not have insurance as required by law? Yes___ No___

130. Have you ever caused anyone serious injury by your operation of a motor vehicle? Yes___ No___

131. Have you ever caused the death of anyone by your operation of a motor vehicle? Yes___ No___
132. Have you ever fled the scene of a hit-and-run accident? Yes____ No____

133. Have you ever driven a motor vehicle while under the influence of:
   a. Alcohol? Yes____ No____
   b. Some type of drug? Yes____ No____

134. In the past month, have you ever driven a motor vehicle while under the influence of:
   a. Alcohol? Yes____ No____
   b. Some type of drug? Yes____ No____

135. Have you ever been arrested or cited for driving while under the influence of alcohol or drugs? Yes____ No____

136. Would you have any reason to be concerned about an investigation into your loyalty to the United States? Yes____ No____

137. Are any of your relatives, friends or associates connected to or sympathetic with terrorists or any organization detrimental to our government?
   a. Are you? Yes____ No____

138. Have you, yourself, ever given any confidential information to any organization or individual that was detrimental to our government? Yes____ No____

139. Would you have any reason to be concerned about an investigation into your personnel record? Yes____ No____

140. In the past 5 years, have you been in a fight in a bar? Yes____ No____

141. In the past five years, have you been in any fight?
   a. Did you start it? Yes____ No____

142. Since you were 18, have you ever struck or injured any person? Yes____ No____

143. Have you ever struck someone you were living with? Yes____ No____

144. Other than in warfare, have you ever caused serious injury to a human being? Yes____ No____

145. Other than in warfare, have you ever been involved in a violent incident such as a shooting, knifing, or fight where someone was or could have been seriously injured or killed? Yes____ No____
146. Other than in warfare, have you ever used any weapon against someone?
   Yes___ No___

147. Other than in warfare, have you ever caused the death of a human being?
   Yes___ No___

148. Do you frequently lose your temper?
   Yes___ No___

149. Have you ever fired a firearm when not on a shooting range or while hunting legally?
   Yes___ No___

150. Are you afraid of firearms?
   Yes___ No___

151. Have you ever applied for a permit to carry a concealed weapon?
   Yes___ No___

152. Do you feel you can take orders from your superior officers without resentment?
   Yes___ No___

153. Do you have any prejudices?
   Yes___ No___

154. Do you feel your prejudices might affect your ability to perform this job?
   Yes___ No___

155. Have you maliciously burned any property?
   Yes___ No___

156. Have you ever turned in a false fire alarm?
   Yes___ No___

157. Have you ever made an anonymous obscene phone call?
   Yes___ No___

158. Have you ever in your entire lifetime done anything at all that you are ashamed of?
   Yes___ No___

159. Is there some undisclosed reason why you want to be a volunteer?
   Yes___ No___

160. Do you know of any reason why you should not be hired by the Department for the position for which you have applied?
   Yes___ No___

161. Is there anything at all in your background that you have not been asked about that might eliminate you from consideration for this job if it were found out?
   Yes___ No___

162. Can you say in complete honesty that you have answered each question truthfully?
   Yes___ No___
DRUG USE QUESTIONNAIRE

163. Have you **ever**, during your entire lifetime, used, tried, experimented, or in **any way** ingested into your body any of the following drugs? (Indicate below)

<table>
<thead>
<tr>
<th>Substance</th>
<th>No</th>
<th>Yes</th>
<th>Used Once?</th>
<th>Used More Than Once?</th>
<th>Date Last Used?</th>
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<tbody>
<tr>
<td>A. Marijuana or Hashish/Hash Oil</td>
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<td>B. Opiates/Heroin</td>
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<td>C. Cocaine</td>
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<td>D. Barbiturates</td>
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<td>E. Amphetamines (Crosstops, Whites, Bennies, Uppers)</td>
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<td>F. Methamphetamine (Speed, Crank)</td>
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<td>G. Crack/Ice</td>
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<td>H. LSD or other hallucinogen including mushrooms</td>
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<td>I. PCP (Angel Dust, Sherms)</td>
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<td>J. Steroids</td>
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<td>K. Used a pharmaceutical drug prescribed for another person</td>
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<td>Type:</td>
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</table>
164. Name any other illegal drug, narcotic or controlled substance not listed above that you have ingested (example: glue sniffing, Jimson weed, etc.):

---

**If the answers to any of the following questions are “yes”, explain fully on lined paper.**

165. Have you ever injected an illegal drug into your body? Yes__ No__

166. Have you ever sold any illegal drug(s)? Yes__ No__

167. Have you ever participated in the manufacture, cultivation, or production of any drug, narcotic or controlled substance? Yes__ No__

168. Have you ever acted as a courier by transporting any drug, narcotic or controlled substance for other than legitimate purposes? Yes__ No__

169. Have you ever told anyone else where to purchase illegal drugs? Yes__ No__

170. Have you ever “held” or temporarily stored any drug, or controlled substance for yourself or anyone else? Yes__ No__

171. Are any illegal drugs in your:
   a. Home? Yes__ No__
   b. Car? Yes__ No__
   c. In your possession? Yes__ No__

172. Have you ever been present when illegal drugs were being used, possessed, or sold? (Not in the course of your duties as a law enforcement officer.) Yes__ No__

173. Have you ever used illegal drugs or controlled substances? (If so, provide explanation for first time use on attached forms) Yes__ No__

174. Have you ever been drunk? (If so, indicate when & circumstances on attached form) Yes__ No__

---

**GANG ACTIVITIES, RELATIONSHIPS**

Give name of gang or gangs you have had any kind of contact relationship or membership with when answering these questions.

Provide your age and/or dates on attached explanation form(s).

175. Have you ever been a member or associate of any street gang? Yes__ No__

176. Has any member of your family ever been a member of a street gang, or knowingly associated with a member of any street gang? Yes__ No__

Page 12 of 13
177. Have you ever attended a gathering or meeting of any street gang?  
   Yes__ No__

178. Have you ever participated in any gang, or gang related activity, including car washes?  
   Yes__ No__

179. Have you ever been present when any kind of gang activity, lawful or unlawful, took place?  
   Yes__ No__

180. Have you ever violated any law while associating with a member of a street gang?  
   Yes__ No__

181. Have you ever been detained, or questioned by any law enforcement agency while in the company of a member or members of a street gang?  
   Yes__ No__

182. If a records check was made of files containing known street gang member, or persons associating with street gang member, would your name, or nickname appear?  
   Yes__ No__

CERTIFICATION:

I hereby certify that all statements made and information provided to background investigators in this questionnaire are true, accurate, and complete. I have not withheld or failed to disclose any information. I understand that any misstatement of material facts, deception of any kind, or making/providing any misleading statements, will subject me to disqualification or dismissal.

Applicant Name Printed:__________________________________________

Applicant Signature:____________________________________________

Date:________________________________________
<table>
<thead>
<tr>
<th>Question</th>
<th>(Include dates &amp; times)</th>
<th>EXPLANATIONS</th>
<th>(Include Locations)</th>
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AUTHORIZATION TO RELEASE INFORMATION

As an applicant for a civilian volunteer program with the Murrieta Police Department, I respectfully request and authorize you to furnish the Murrieta Police Department, or its representative, any and all information that you may have concerning me, my work reports, including all information of a confidential or privileged nature.

This information is to be used to assist the department in determining my qualifications and fitness for the position that I am seeking with the Murrieta Police Department.

I hereby release you, your organization, or your employer or agents from any liability to damages which may result from the furnishing of the information requested above.

This waiver will expire 18 months after the date signed. A photocopy of this document may act as the original.

Applicant’s signature: ___________________________ Date: _____________

Witness’s signature: ___________________________ Date: _____________

Notice to company/organization: You may retain this form for your records.
BACKGROUND INVESTIGATION DISCOVERY WAIVER

Name: ____________________________

Address: __________________________

Position Applied For: Police Volunteer Date: _________________

I understand that this background investigation is done for volunteer employment purposes only. It is to assess qualifications for this specific employment and is in no way to be construed as intended for any other purpose.

I understand that I will be given no feedback or results other than being notified of 'accepted' or 'not accepted'. I also acknowledge that these results are confidential and will be the property of the City of Murrieta Police Department and will not be made available to any other police agency or employer without a Personal Information Waiver signed by me.

If I am not recommended for this position, I understand that this means only that I do not meet the standards established for the position for which I have applied.

Applicant's signature: ____________________________ Date: _________________

Witness's signature: ____________________________ Date: _________________
RIDE-ALONG PROGRAM

The Murrieta Police Department has an on-going citizen Ride-Along Program and welcomes the residents of our community to participate in an interesting experience. All citizens living in the City of Murrieta, working in the community, or potential lateral applicants for a position with our agency are encouraged to participate in this meaningful program.

The Murrieta Police Department encourages citizen involvement in the community. We truly believe it is the enlightened citizen who makes our job more meaningful and successful. We want to build strong communication and cooperation with you. We are dedicated, as your public servants, to providing the highest level of service possible. By allowing you to see, firsthand, how we provide our services and the challenges we are facing, we believe our relationship with our community can do nothing but grow. You can help us win the fight against crime.

The following guidelines will enlighten you as to our ride-along policy and provide pertinent information:

Ride-alongs are scheduled in four hour increments from 7:00 pm to 11:00 pm. Advise the Watch Commander which day you would like to ride.

It will be necessary for you fill out a Ride-Along Information Sheet and sign a waiver releasing responsibility to the City of Murrieta. Persons under the age of 18 years will require the signature of a parent or legal guardian. Unfortunately, persons under the age of 16 years are excluded from participation.

Because of time and manpower constraints, we must limit ride-alongs to once every 6 months.

We request you dress in casual clothing; however, Levis and Tee-Shirts, etc. are not allowed. On evening rides, make sure you bring a coat, especially in the winter months.

Please adhere to these guidelines and instructions from the officer. The ride-along is a privilege and may be terminated at our discretion.

If there are any concerns you may have, please feel free to contact the on-duty Watch Commander at: 304-COPS (2677), extension 6797.

Thank you for your inquiry and interest in our Ride-Along Program. We hope your ride-along with one of our police officers will be an interesting and rewarding experience.

Good Luck! We hope you have an enjoyable evening.

Murrieta Police Department
(The following (2) page form must be completed and turned in to the Murrieta Police Department)

AGREEMENT ASSUMING RISK OF INJURY OR DAMAGE

WAIVER AND RELEASE OF CLAIMS AND INDEMNITY AGREEMENT

WHEREAS

I, the age of eighteen and not being a member of the Police Department of the City of Murrieta, have made a voluntary request to ride as a guest in a vehicle assigned to the Murrieta Police Department and to accompany a member or members of the Police Department during the performance of their official duties, and

WHEREAS, the Police Department of the City of Murrieta is willing to allow me to ride as a guest in a vehicle assigned to the department and to accompany a member or members of the Department during the performance of their duties on the following conditions:

NOW, THEREFORE, in consideration of the permission given me to ride in a vehicle assigned to the Murrieta Police Department and to accompany a member or members of said Department during the performance of their official duties, I do hereby agree:

1. That I am aware that the work of the Police Department is inherently dangerous and that I may be subjected to the risk of personal injury, death or property damage arising from or in any way connected with the use of said vehicle or in connection with any other activities, in the performance of said duties, and before and after said performance, whether resulting from or concerning violence, speed, assault, riot, breach of peace, fire, explosion, gas, electrocution, the escape of radioactive substances, other wrongful or criminal act, or any other occurrences or matters while accompanying or observing or in any manner related to the activities of a member or members of the Police Department. I voluntarily and knowingly assume all of these risks.

   _______ Initials

2. That the City of Murrieta, the Chief of Police of the Murrieta Police Department, his sureties, all members of the Police Department of the City of Murrieta, their sureties, employees of the City and its agents and representatives, and each of them, shall not be responsible or liable for any injury, death, damage, loss or expense, either to me or my property, or to my heirs, dependents, or representatives, incurred while or as a result of riding in any vehicle assigned to the Murrieta Police Department or otherwise incurred while or as a result of accompanying or observing or in any manner relating to the activities of any member or members or employees or agents of the Murrieta Police Department or of the City of Murrieta whether or not caused by or resulting from any negligent or wrongful act or omission on the part of any member or employee or agent of the Murrieta Police Department or of the City of Murrieta or from any dangerous condition of public property or other cause. I voluntarily and knowingly assume these risks, and by my consent agree that no action will be brought against said City, Department, Chief of Police, members, sureties, or City employees, agents or representatives arising out or resulting from or concerning any negligent or wrongful act or omission, dangerous condition or other cause.

   _______ Initials

3. For myself, my heirs, executors, administrators and assigns to hold harmless, defend (with attorneys approved by the city) and indemnify the City of Murrieta, the Chief of Police of the City of Murrieta, all members of the Police Department of the City of Murrieta, their sureties, and city’s employees, agents, and representatives, and each of them, against any and all matters or actions, causes of actions, suits, debts, claims, demands or damages or liability or expenses of every kind and nature incurred or arising by reason of any actual or claimed negligent or wrongful act or omission of mine while riding in any vehicle assigned to the Police Department of the City of Murrieta or while accompanying any member or members of said Police Department during the performance of their official duties.

   _______ Initials

Page 1 of 2
I hereby verify that I have carefully read and understand the contents of this document and sign the same of my own free will.

Date: __________ Signature: __________________________________________________________________
Print name: __________________________________________________________________

Signature of authorized Parent or Guardian, confirming and agreeing to the above, if applicant is a minor:

Date: __________ Signature: __________________________________________________________________
Print name: __________________________________________________________________

**RIDE-ALONG INFORMATION**

**NAME:**
_________________________________________________________________

**HOME ADDRESS:**
_________________________________________________________________

**BUSINESS ADDRESS:**
_________________________________________________________________

**HOME PHONE:** __________ **BUSINESS PHONE:** __________

**DATE OF BIRTH:** __________ **DRIVERS LICENSE #:** __________

**REASON YOU DECIDED TO RIDE-ALONG:**

_________________________________________________________________

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