



West Bridgewater Police Department



Cadet Academy Application

(Please print all information clearly)

Name: Last name First Name M.I.

Address: _____

Date of Birth: _____ Massachusetts Driver's License #: _____

Telephone #: _____ Email Address: _____

Grade Level: _____

Sports/Clubs (if any): _____

Please share your thoughts on why you are interested in attending the Cadet Police Academy and what you hope to learn:

Parent/Guardian Name: _____ Phone #: _____

Parent/Guardian Name: _____ Phone #: _____

Important Notice: A criminal records check/background investigation will be conducted on all applicants for this program. By signing below, you hereby grant the West Bridgewater Police Department authority to conduct a criminal history records check/background. The background check will be kept confidential. By submitting this application, you understand that any student may be removed for disruptive behavior that obstructs the concept of this program.

Parent Signature: _____ Date: _____

Completed applications should be emailed to SRO Packard (cpackard@wbpd.com) or returned to the SRO Office (located in the HS main office). Applications must be received no later than January 31st, 2025.

School Resource Officer Christopher Packard
West Bridgewater Police Department
cpackard@wbpd.com
(508)894-1220 ext. 5100



WEST BRIDGEWATER POLICE DEPARTMENT



Cadet Academy 2024-2025

COURSE SYLLABUS - Class #1

The program will take place on Tuesday evenings at the West Bridgewater Middle/Senior High School from 6 pm - 8 pm in the Learning Commons. Portions of some classes will be held outside on the High School grounds.

WEEK1: Tuesday, February 25th, 2025

Introduction to the Program. Class will end early and students may drive, get a ride, or walk to the station for a full tour of the West Bridgewater Police Station.

WEEK2: Tuesday, March 4th, 2025

Constitutional Law / Criminal Law.

WEEK 3: Tuesday, March 11th, 2025

Patrol Procedures & Motor Vehicle Law.

WEEK 4: Tuesday, March 18th, 2025

Use of Force.

WEEK 5: Tuesday, March 25th, 2025

Crime Scenes and Sex Offenders.

WEEK 6: Tuesday April 1st, 2025

K-9 Instruction & Demonstration.

Parent/Guardian Initials: _____

Student Initials: _____



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Cadet Academy 2024-2025



WEEK 7: Tuesday, April 8th, 2025
Specialty Positions (SWAT, Motorcycle, Bicycle).

WEEK 8: Tuesday, April 15th, 2025
Certificates & debrief.

Parent/Guardian Initials: _____

Student Initials: _____



Cadet Academy 2024-2025

CLASS RULES & REGULATIONS

1. Classes will begin promptly at 6:00 pm unless otherwise instructed.

If you are unable to attend class, please let us know by seeing Officer Packard to fill out an excused slip. A valid reason or proper documentation must be provided for an excused slip to be approved. If unable to notify in person, please send an email to either cpackard@wbpd.com or ochurch@wbpd.com. This will help the instructor prepare for class and make sure you still receive credit.
2. Casual dress is appropriate. *Please note that part of the K9 Demo and Patrol Procedures will be held outside-please dress appropriately.*
3. No audio or video recording may take place at any time. The class may be recorded by the West Bridgewater Police Department.
4. No alcoholic beverages of any kind, and no smoking of any kind will be allowed on the property unless part of an authorized class.
5. At no time, will anyone be allowed to bring with them, carry on their person, or leave in their vehicle, a weapon of any type while attending classes or participating in an event.
6. Cancellation of classes will follow West Bridgewater School District notification procedures. If the district cancels classes because of inclement weather, there will be no student program. If the class needs to be canceled or postponed for any other reason, there will be an announcement made during the school day and you will receive an email.
- 7.



WEST BRIDGEWATER POLICE DEPARTMENT



Cadet Academy 2024-2025

RELEASE OF CLAIMS

I, _____ IN CONSIDERATION OF THE
OPPORTUNITY TO PARTICIPATE IN THE CRIMINAL JUSTICE
PROGRAM

CONDUCTED BY THE WEST BRIDGEWATER POLICE DEPARTMENT,
DO HEREBY RELIEVE THE WEST BRIDGEWATER POLICE DEPARTMENT,
THE TOWN OF WEST BRIDGEWATER, AND ANY EMPLOYEES, AGENTS,
OFFICIALS, OR REPRESENTATIVES OF THE WEST BRIDGEWATER
POLICE DEPARTMENT AND THE TOWN OF WEST BRIDGEWATER OF
ANY AND ALL LIABILITY FOR ANY AND ALL CLAIMS WHICH I MAY
HAVE AS A RESULT OF MY PARTICIPATION IN THE CRIMINAL JUSTICE
PROGRAM AND ALL ACTIVITIES RELATED HERETO; I FURTHER
ACKNOWLEDGE THAT PARTICIPATION IN THE PROGRAM MAY EXPOSE
ME OR MY PROPERTY TO RISK OR HAPPENINGS ENCOUNTERED BY
POLICE OFFICERS OF THE TOWN OF WEST BRIDGEWATER WHILE IN
THE PERFORMANCE OF THEIR DUTIES. I THEREFORE ENTER THIS
PROGRAM ASSUMING ALL RISK OF INJURY TO MY PERSON OR
PROPERTY ARISING FROM MY PARTICIPATION IN THE PROGRAM, AND
IN THAT REGARD ASSUME AND AGREE TO PAY ALL MEDICAL COSTS
OR PROPERTY DAMAGE COSTS OCCASIONED
THEREBY RELEASING THE TOWN OF WEST BRIDGEWATER, THE WEST
BRIDGEWATER POLICE DEPARTMENT, AND ITS EMPLOYEES, AGENTS,
OR OFFICIALS FROM AND AGAINST ALL CLAIMS, DAMAGES,
INJURIES OR CAUSES OF ACTIONS WHICH I, MY HEIRS, EXECUTORS,
OR ADMINISTRATORS MAY HAVE HEREIN.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND
AND SEAL THIS _____ DAY OF _____, 2024.

STUDENT NAME

STUDENT SIGNATURE

PARENT/GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE

Parent/Guardian Initials: _____

Student Initials: _____



Cadet Academy 2024-2025

Eligibility Requirements

1. Must be a Freshman, Sophomore, Junior or Senior attending West Bridgewater Middle/Senior High School
2. Must receive parent/guardian approval, including signatures by the student and his/her parent or guardian on a background check, liability waiver and photo/video release
3. Must be of good moral character with no arrest or conviction record or significant school discipline
4. Must demonstrate a positive demeanor and attitude in the company of others, either through demonstration, or during background check interviews with family members, neighbors, teachers, coaches, school administrators and or employers
5. Must remain in school and in good academic standing
6. Must be able to keep confidential any and all information they receive, or come into contact with while working at the police department, and/or while working with police officers

Parent/Guardian Initials: _____

Student Initials: _____



WEST BRIDGEWATER POLICE DEPARTMENT



Cadet Academy 2024-2025

Video and Photo Release

I, _____, parent or legal guardian of _____, understand that my son/daughter's photograph may be taken by the agents of the West Bridgewater Police Department, the Town of West Bridgewater, producers, sponsors, organizers, and/or assigns. I agree that said photograph and/or video photography, film photography, or other reproduction may be used without charge by the agents of the West Bridgewater Police Department, Town of West Bridgewater, its producers, sponsors, organizers and/or its agents for the purpose of advertising its Criminal Justice Program, its community policing efforts and other legitimate purposes as determined by the West Bridgewater Police Department. By signing this form, I consent to having my child's photo, name, awards, and achievements published in any press releases, newspaper articles, newsletters, and or television productions. Said consent may be revoked at any time by communicating the revocation in writing to the Chief of Police.

Dated this _____ day of _____ in the year of 20_____

Applicant Printed Name

Applicant Signature

Parent/Guardian Printed Name

Parent/Guardian Signature

Parent/Guardian Initials: _____

Student Initials: _____