

Los Angeles County Sheriff – Lakewood Station

Application Request for Patrol Car Ride-Along

PERSONAL INFORMATION

Date _____

Last Name First Name Middle Name

Email address

Sex Age Date of Birth CA Driver's License/ID # Social Security #

Current Address Apt #

City State Zip Phone (Cell / Home)

Previous Address (If at current for less than 2 years) Apt #

City State Zip

Employer Occupation Work Phone

PERSON(S) TO BE CONTACTED IN CASE OF EMERGENCY

Name Relationship

Address

Home Phone Cell Phone Work Phone

Name Relationship

Address

Home Phone Cell Phone Work Phone

Have you been on a patrol ride-along at Lakewood Station within the past 12 months? ☐ Yes ☐ No

Date of last ride along: _____

PLEASE CHECK ONE OF THE FOLLOWING:

☐ Currently processing with L.A.S.D ☐ Full time ☐ Reserve

(submit a copy of your authorization memo from your background investigator)

☐ Currently processing with another police agency: _____

☐ College student: Name of school _____

☐ Interested citizen/Other (Please explain): _____
