

Millbury Police Department

Criminal Justice Intern



Definition:

The Millbury Police Department offers unpaid internships for area college students seeking a career in criminal justice related field of work. Interns will work in various aspects of the Department during the course of the program gaining experience and exposure to different facets of police work.

Program Requirements:

- Be at least 18 years of age
- Possess basic computer skills
- Participate in an oral interview
- Successfully pass a CORI / background check
- Sign & abide by a non-disclosure agreement
- Sign a liability waiver

Intern Duties:

- Various filing, sorting & administrative tasks
- Maintain the Records Management System / In House Records as directed
- Observe in the Communications Center
- Participate in a police ride-along
- Assist Officers at special events / special duties ie:
 - S.R.O @ the Schools
 - District Court session with the Court Officer

Intern Rules:

Appearance: Interns shall maintain a neat, professional and well-groomed appearance. Attire shall consist of regular dress slacks or khaki-style pants with a polo or button down shirt.

Conduct: Interns shall not engage in conduct that brings discredit to himself/herself or the Department. Interns shall not use profane, insulting or degrading language to members of the Department or the general public.

Confidentiality: Interns shall treat any and all business of the Department as confidential and shall disseminate information regarding the Department business only when authorized to do so by Department staff.

Payment/Wages: Internships are strictly volunteer positions and interns shall not receive any compensation for this work.

Punctuality: Interns shall report punctually for all scheduled work and assigned duties. If unable due to an illness or an emergency, interns are required to call into the station to inform the Department of this.

Any further information regarding the Intern Program, please contact:

Lieutenant Brian Lewos via phone @:

508-865-352 or email BLewos@MillburyPolice.com



**MILLBURY POLICE DEPARTMENT
127 ELM STREET
MILLBURY, MASSACHUSETTS 01527**

APPLICANT INFORMATION

Name:

Address:

Date of Birth:

Social Security Number:

Phone Number:

E-mail Address:

I HEREBY CERTIFY THAT THERE ARE NO WILLFUL MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THE FOREGOING STATEMENTS AND ANSWERS TO QUESTIONS. I AM FULLY AWARE THAT ANY SUCH WILLFUL MISREPRESENTATIONS, OMISSIONS OR FALSIFICATIONS WILL BE GROUNDS FOR IMMEDIATE REJECTIONS OF TERMINATION IN PARTICIPATION WITH THE RIDE ALONG PROGRAM, INTERNSHIP OR ANY OTHER SIMILAR PROGRAM BY THE MILLBURY POLICE DEPARTMENT.

Signature

Date Signed

MILLBURY POLICE DEPARTMENT

Confidentiality Agreement Non Disclosure of Confidential Information and Waiver of Liability

- I. As evidenced by my signature below, I agree not to discuss or disclose any person's personal information observed or heard while participating in the Police Ride Along Program, Internship or any other similar program by the Millbury Police Department. This confidentiality and non-disclosure agreement includes, but is not limited to: criminal histories, motor vehicle information, or any gained from an ongoing or past police investigation.
- II. Any breach of confidentiality or disclosure of any such information is a misdemeanor and by signing this document, I state I am fully aware of this fact and will be subject to criminal prosecution as well as possible civil liability for any such breach. I am also aware that Federal as well as State Statutes governing the privacy of an individual's records will also be violated by such breach or disclosure.
- III. I, binding my heirs, executors, administrators and assigns, do hereby release and agree not to hold liable the Town of Millbury, its officers, agents, and employees, for any and all actions, causes of actions, claims, demands, costs for damages, both foreseen and unforeseen, arising from or resulting from property damage, personal injuries or death sustained by me or my property or any of my heirs or assigns as a result of my participation in the Police Ride Along Program, Internship or any other similar program by the Millbury Police Department, whether caused by negligence or an intentional act.
- IV. I understand that my participation in this program may include riding in a police vehicle with a police officer who will be responding to police calls for service and performing other police duties. I hereby agree to obey the instructions of any police officer regarding matters of affecting official police business. I know that, as an inherent incident of my participation in this program, I may be placed in unpredictable situations, both foreseeable and unforeseeable, which may be dangerous and could lead to serious bodily injury or death, and that there is no duty on the part of the Town nor any of its officers or employees to protect me from said danger.
- V. I understand that my participation in the Police Ride Along Program, Internship or any other similar program by the Millbury Police Department may be terminated at any time by the Millbury Police Department for any or no reason at all.
- VI. I state I have carefully read this Release, know its contents, accept the conditions stated herein and sign my name as a free and voluntary act.

Date Signed

Signature

MILLBURY POLICE DEPARTMENT

AUTHORIZATION TO RELEASE INFORMATION

I request and authorize the release of any information that the Millbury Police Department may request from every person firm, company, corporation, partnership, governmental agency, court, association having control over of any documents, records, reports, or other written information pertaining to me, to cooperate and allow inspection or provide copies, of such documents, records, reports or other information to the Millbury Police Department or any of its agents or representatives.

I hereby release, exonerate and discharge the Millbury Police Department, its agents and representatives, and any person or entity so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such written documents, records, reports, or other written information to the Millbury Police Department or its agents or representatives.

I also understand and agree that all information received by the Millbury Police Department in connection with this application and background information is confidential and shall not be disclosed to me.

I hereby acknowledge that a facsimile (FAX) or copy by any other method, of this document may be used and is as valid as the original copy.

This release will expire 120 days after the date signed.

Signature & Date