STATE OF CALIFORNIA
DEPARTMENT OF CALIFORNIA HIGHWAY PATROL

CADET ARREST AND CITATION QUESTIONNAIRE

CHP 446F (Rev. 8-14) OPI 070

INSTRUCTIONS: Enter below **ALL ARRESTS** or **CITATIONS** and their disposition, regardless of when or where they occurred. **ALL INCIDENTS** must be listed, even those you believe may have been deleted from your official record, except those that have been sealed, expunged, or destroyed under Penal Code Sections 851.7, 851.8, 1000.5, 1203.45; Health and Safety Code Sections 11361.5, 11557, or its successor 11366, when that arrest or conviction was stipulated or designated to be a lesser included offense of the offense of possession of marijuana, or Welfare and Institutions Code Section 781. **ALL TRAFFIC CITATIONS**, regardless of the date received, must be listed. This will supplement the information on your application. It is part of the examination, and you **must** bring it with you to your physical ability test. Note: The Department of Motor Vehicles retains records for only three years. However, you must list **ALL ARRESTS** and **CITATIONS** regardless of date.

NAME *(PRINT CLEARLY)*	DRIVER LICENSE NUMBER

ADDRESS *(INCLUDE NUMBER, STREET, CITY, STATE AND ZIP CODE)*

☐ I have never been arrested nor given a traffic citation. *(You may omit offenses for which the record has been sealed, expunged or destroyed under Penal Code Sections 851.7, 851.8, 1000.5, 1203.45; Health and Safety Code Sections 11361.5, 11557, or its successor 11366, when that arrest or conviction was stipulated or designated to be a lesser included offense of the offense of possession of marijuana, or Welfare and Institutions Code Section 781.)*

Have you **EVER** received any traffic citations *(except parking violations, including military bases, or in a foreign jurisdiction)?* ☐ Yes ☐ No

Offense Order	Place and Date of Citation: City/State	Place and Date of Citation: Month/ Year	Describe charges *(Example: reckless driving, suspended license, speeding, stop sign, seat belt, tinted windows, etc.)*	If original charge was changed, give charge of which convicted. *(Example: drunk driving reduced to reckless driving, suspended license to unlicensed.)*	Disposition *(guilty, not guilty, dismissed, etc.)*	Indicate whether fined and/or action taken on driver's license.
1.						
2.						
3.						
4.						
5.						
6.						

Have you **EVER** been arrested? ☐ Yes ☐ No

Offense Order	Place and Date of Arrest: City/State	Place and Date of Arrest: Month/ Year	Describe charges. *(Example: drunk driving, burglary, battery, assault, spousal abuse, drunk in public, resisting arrest, etc.)*	If original charge was changed, give charge of which convicted. *(Example: drunk driving reduced to reckless driving, burglary to trespassing, etc.)*	Disposition *(guilty, not guilty, dismissed, etc.)*	If guilty show: Date and Place of Incarceration	If guilty show: Length of Confinement	Length of Probation; Name, Address and Phone Number of Probation Officer
1.								
2.								

Destroy previous editions

CADET ARREST AND CITATION QUESTIONNAIRE *(CONTINUED)*

Have you been involved as a driver in a motor vehicle accident within the last **TEN** years? If yes, give details for each. ☐ Yes ☐ No

NOTE: This includes unreported accidents.

1. DATE	LOCATION *(STREET AND CITY)*		AT FAULT ☐ Yes ☐ No
POLICE REPORT ☐ Yes ☐ No	POLICE AGENCY	REPORT NUMBER	WERE YOU CITED? ☐ Yes ☐ No
2. DATE	LOCATION *(STREET AND CITY)*		AT FAULT ☐ Yes ☐ No
POLICE REPORT ☐ Yes ☐ No	POLICE AGENCY	REPORT NUMBER	WERE YOU CITED? ☐ Yes ☐ No
3. DATE	LOCATION *(STREET AND CITY)*		AT FAULT ☐ Yes ☐ No
POLICE REPORT ☐ Yes ☐ No	POLICE AGENCY	REPORT NUMBER	WERE YOU CITED? ☐ Yes ☐ No
4. DATE	LOCATION *(STREET AND CITY)*		AT FAULT ☐ Yes ☐ No
POLICE REPORT ☐ Yes ☐ No	POLICE AGENCY	REPORT NUMBER	WERE YOU CITED? ☐ Yes ☐ No
5. DATE	LOCATION *(STREET AND CITY)*		AT FAULT ☐ Yes ☐ No
POLICE REPORT ☐ Yes ☐ No	POLICE AGENCY	REPORT NUMBER	WERE YOU CITED? ☐ Yes ☐ No

Has your driver's license **EVER** been suspended or revoked, or has your driving privilege **EVER** been put on probation or restricted? If yes, explain circumstances. Indicate length of restriction and when your driving privilege was reinstated. ☐ Yes ☐ No

I have listed above all the information requested. I understand that this information is required of all persons seeking employment as peace officers and that Cadets are subsequently appointed as Officers *(peace officers)* upon successful completion of the training program. I also understand that a thorough independent investigation will be made of my background and that any incident I have omitted may be considered deliberate falsification and may result in the permanent withholding of my name from certification should I be successful in the examination. I understand that this information will be retained in your confidential files.

SIGNATURE	DATE

Privacy Statement: Agency name: California Highway Patrol *(CHP)*

Unit responsible for maintenance: Cadet Selection/Hiring, P.O. Box 942898, Sacramento, CA 94298-0001

Authority: Government Code Section 18934 provides that every applicant for an examination shall file a formal, signed application to the CHP. The information you furnish on your application will be used to determine whether or not you meet the entrance requirements and may be a basis for arriving at your final rating in this examination.

Access: All examination-related information submitted to the CHP becomes confidential information and the property of the CHP. Such information will not be returned, subject to Civil Code 1798.3(a)(2). Only authorized State Personnel Board and CHP employees will be allowed access to the information.

Effective January 12, 1982, the U.S. Supreme Court ruled that effective immediately, all persons appointed to peace officer positions must be citizens of the United States. I hereby certify that I am a citizen of the United States of America.

SIGNATURE	DATE