

VOLUNTARY RELINQUISHMENT OF CERTIFICATION

Applicant Information

|               |                  |
|---------------|------------------|
| Name          | Stephen Gondella |
| Date of Birth |                  |
| Email         |                  |
| Phone         |                  |
| Address       |                  |

Certification Information

Legal and Professional History

|   |   |
|---|---|
| 1. Have you ever been arrested?   | NO  |
| 2. Have you ever been subject to any criminal prosecution?  | NO  |
| 3. Have you been subject to a restraining order or court order that restricted your conduct or was based on your conduct? | NO  |
| 4a. Have you been involved in any civil or administrative agency actions related to Law Enforcement service?              | NO  |
| If you wish to provide additional information regarding any of the above responses, please use the space below.           | During my career, no findings or negative actions have been taken regarding any allegations. All allegations against me have resulted in my being found not guilty, exonerated, or not sustained. |

Acknowledgement & Attestation

**Description Area**

By signing this form, I acknowledge and agree that: I have read, understood, and agree to the terms of the Policy on Voluntary Relinquishment of Certification. I understand that upon relinquishment, I will be ineligible for appointment, employment, or engagement in any law enforcement capacity in Massachusetts. I understand that relinquishment is not the same as decertification and that the POST retains authority to take future action based on past conduct.

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**I hereby certify under the pains and penalties of perjury that all information provided in this application is true, complete, and accurate to the best of my knowledge.**

A handwritten signature in black ink, appearing to be 'A. R. Smith', written over a horizontal line.

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**Today's Date**

August 20, 2025

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