

Farmville Police Department Ride-Along Application

Date of Application: _____ / _____ / _____
Month Day Year

Please Print Legibly

Last Name:			First			Middle		
Physical Address:								
City, State, Zip								
Home Phone:			Social Security Number:			Date of Birth		
Place of Employment/School								
Address of Employment/School and Phone Number								
Gender		Race:		Height:		Weight:		
Male								
Female								
References: Name			Address/Phone			Relationship		

I, _____, authorize that a criminal history and DMV check be Conducted on
Signature

my name in reference to this Ride-Along request.

Are you a member of Crime Solvers? Yes No Have you ever been arrested: Yes No

Why do you wish to participate in the Ride-Along Program? _____

Do you have a preference of: Date: _____

Officer: _____

Shift: _____

**FARMVILLE POLICE DEPARTMENT
 WAIVER OF CIVIL LIABILITY
 CITIZEN RIDE-ALONG PROGRAM**

In consideration of the Farmville Police Department granting me permission to accompany a member of the Farmville Police Department as a participant in the Citizen Ride-along Program,

I, _____, understand that this program is inherently dangerous and I assume all risk of injury. To the extent legally permissible, I hereby waive any and all claims and demands, of whatever nature, which I have or may hereafter acquire against the Town of Farmville, its Police Department, and any or all of their servants, agents, employees and officers, as a result of my voluntary participation in the Ride-along Program on the date and time specified. I further agree to comply with all rules of the Ride-along Program and any instructions or orders issued by members of the Police Department in connection with this program. I certify that I am at least eighteen years of age. I hereby acknowledge that I fully understand the consequences of this waiver and that I have signed this as a voluntary and intelligent act on my part.

RIDE-ALONG PARTICIPANT (Printed name)

STREET ADDRESS

HOME PHONE

WORK PHONE

RIDE-ALONG PARTICIPANT (Signature)

DATE

SIGNATURE OF PARENT/GUARDIAN IF REQUIRED

DATE

Citizen Ride-Along Regulations

The Ride-Along participant should meet the following requirements and MUST adhere to all rules:

1. Participants must be at least 18 years old.
2. Media representatives must be approved by the office of the Chief of Police.
3. Prospective applicants may ride once unless approved for a second Ride-Along by the lieutenant of patrol.
4. Participants must pass a criminal history and DMV record check.
5. Participants must wear appropriate attire. Dresses or skirts are not recommended. Blue jeans, shorts, sandals, or collar-less shirts are not permitted.
6. Participants should plan on having a meal break at least once during the course of the ride-a-long and should be prepared to pay for their own meal.
7. Participants will remain with the assigned officer throughout the shift unless otherwise directed by a supervisor.
8. If asked, participants shall identify themselves as a citizen observer.
9. The participant will not become actively involved in any police function.
10. In an emergency, the participant will reasonably provide for his/her own safety and take no other action.
11. The participant will not be armed in any fashion unless as an active law enforcement officer.
12. Misconduct, interference, or failure to follow police directions will result in immediate termination of the ride-along session and will jeopardize future participation.
13. Immediate Family members or persons romantically involved with an officer must ride with a non-family/ non-involved officer.
14. Cameras and voice recorders are prohibited from use while participating unless prior approval has been granted by the Chief of Police.
15. The Supreme Court has ruled that it is a violation of the Fourth Amendment for officers to bring third parties into a home during the execution of a warrant, when the presence of the third party in the home is not in aid of the execution of the warrant. Officers may allow third party entries when they are in aid of the execution of the warrant, and are approved by a supervisor.
16. Any questions regarding these requirements should be addressed with the Uniform Operations Administrative Sergeant prior to submission of this application.

I have read and understand the above requirements and will comply with all.

Applicant Signature: _____

Submit this Application to the Uniform Operations Lieutenant for Approval:

APPROVED

DISAPPROVED

Signature of Reviewing Lieutenant: _____