Greeley Police Department Ride Along Application

Date and Time Ride Along Requested:	From:	am/pm (circ	T .	am/pm (circle)		
Last Name:	First Name:		MI:			
Date of Birth:	Occupation:	C': State Zie	Phone:			
Address: Purpose of Ride Along request:		City, State, Zip)			
Signature:		Date:				
You are hereby granted permission to ride in a police vehicle of the		Approved by:				
City of Greeley at such times and in such of	districts as may be	Denied by:				
approved by the Chief of Police or his design	nated representative.	Date:				
Remarks:						
Responsibility of the person riding along: A) Persons riding along in police vehicles I. Should dress appropriately by we	ire. If the officer or a poli-		are on the back of this form.			
you will not be allowed to ride. II. Will not enter into any investigation or converse with any witness or prisoner concerning a police incident or investigation. III. Will not operate any police equipment, vehicle or handle anything related to a police investigation. In the case of an emergency, the police officer may ask for assistance as authorized under law. B) Citizen ride-alongs must comply with orders from officers. Under the direction of the officer, the ride-along may be required to remain in the patrol vehicle on certain calls. If a ride-along fails to obey a direct order of a police officer, it may result in permanent termination of the ride along privilege.						
C) Ride along requests are restricted to once D) The Ride along requests date should be a Waiver (to be witnessed by a police department rep	at least 72 hours from the ti	ime of the application. App	proval time is ty	ypically 3-5 days.		
- Waiver (to be withessed by a ponce department rep	-					
[(name)	of		full address)			
For myself and my heirs, executors, administration suits of any kind or nature whatsoever against the Greeley Police Department acting under twehicle of the City of Greeley, or while I am in a police vehicle. I am aware that I have vol in such a vehicle and observing the police off will be dangerous and expose me to the risk of	t the City of Greeley, the the color of his/her offic observing the police off luntarily sought permiss ficers, the officers and v	gns do hereby waive all ne Greeley Police Depart cial authority, arising fro fficers acting under the c sion to ride in a police ve	claims, demandement, or any any occurricular of their a chicle and that	agent or employee of Greeley or rence while I am riding a police authority co-incident with riding t during the time that I am riding		
I hereby declare that I have read, understood,	and voluntarily accepted	d the terms and risks stat	ted in the fore	going paragraph.		
IN WITNESS WHEREOF, I SET MY HAND) THISDA	Y OF		, 20		
Signature:		PARENT!	AL CONSE	ENT FOR MINORS		
Witnessed by representative of the Greeley po	olice Department					
Printed Name:						
Signature:		Print Name:				
		Signature:		Date:		

Greeley Police Department Ride Along Questionnaire

Please print or type			
Name:	D.O.B		
Driver's License #	State		
Have you ever been arrested? Yes If yes, please explain:	s No		
Have you ever been the subject of If yes, please explain:	a criminal investigation? Yes	No	
Have you ever had any involvement gangs? YesNo If yes, please explain:		nds, associates, or re	elatives that have been involved in
What experiences have you had wi Please explain:	th law enforcement? Positive	Negative	None
Are you considering applying or he	ave you already applied for a Polic	ce Officer position w	vith the Greeley Police Department
	RANT PERMISSION FOR TH	E GREELEY POLI	D COMPLETE TO THE BEST (ICE DEPARTMENT TO VERIF IECK FOR PRIOR CRIMINAL
Signature:	Date:		_

Greeley Police Department Ride Along Application Instructions

- A) The Ride Along Application must be completed and submitted to the Greeley Police Department at 2875 10th Street, Greeley, Colorado or faxed to 970-351-5433.
- B) You must sign the waiver in the presence of a police department representative. If you submit your application by mail, you can sign your waiver at the time of your ride along in the presence of the officer with whom you will be riding.
- C) Individuals less than 18 years of age on the scheduled ride-along day must be signed by a parent or legal guardian meeting the guidelines indicated above. The minor must be a relative of a police department employee. The minimum age is 16 years old. This is subject to approval by the watch commander.
- D) Please allow 3-5 days to process your ride along application and to schedule your ride along.
- E) The Police Department will make every effort to accommodate your request for a ride along, however not all requests can be accommodated. Please allow for some flexibility in scheduling.
- F) Ride alongs are limited to a maximum of 4 hours.