

CHURCHILL COUNTY SHERIFF'S OFFICE

Ride-along application:

I, _____ request to participate in the Churchill County Sheriff's Office Ride-Along Program.

Name _____ Address _____

Occupation _____ Employer Address _____

Cell Phone _____ Work Phone _____ Other _____

DOB _____ SOC _____

Have you ever been arrested for any crime? yes no

Are you currently a party to a protection or restraining order? yes no

How did you hear of the Ride-Along Program? _____

Why do you wish to participate in the program? _____

Who to notify in case of emergency? _____

Phone # _____ Cell Phone _____

Address _____

My signature below indicates an understanding and consent for the Churchill County Sheriff's Office to conduct a background check.

I further acknowledge that I understand the inherent dangers associated with Law Enforcement and this activity.

Requesting Party Signature _____

Sheriff's Office Use Only

- Background check complete.
- Cleared to participate.
- Contact made with applicant.

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Rules:

- The participant shall play no active role in the police function. The ride-along shall act only as an observer unless otherwise directed by the Host-officer.
- The participant shall not be allowed to operate any Sheriff's Office equipment unless directed to do so by a police officer in an extreme emergency.
- The participant must remain in the police vehicle at all times until directed otherwise by the Host-officer.
- The participant shall not speak to victims, witnesses, prisoners or other persons associated with a police event. Should a victim, witness, prisoner or other person speak to the participant, the participant should politely direct the person to speak to one of the officers present.
- The participant shall not bring cameras or any recording devices without the express written permission of the Sheriff.
- The participant shall not enter any person's home while participating in the ride-along.
- The participant shall follow the instructions of the Host-officer at all times during the ride-along.
- The participant shall not carry any firearm or other weapon even when otherwise authorized by law, while participating in the ride-along program.
- The participant shall have sufficient funds available for food and drinks as the Host-officer is not given expense money to cover these items.
- Rider understands that they may be called to court as a witness if they observe a police event which becomes subject to court action.
- Rider understands that they must arrive for their ride-along conservatively dressed and with proper hygiene. Failure to do so **will** result in refusal to allow them to participate on that day.

Participant's signature _____

Shift Supervisor's signature _____

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DEPUTY'S RIDE-ALONG SURVEY

This form is to be completed at the end of the shift that the observer rides on by the Deputy who had the observer. The survey shall be forwarded to the Sergeant / Shift Supervisor maintaining the ride-along program records. The Shift Supervisor shall review the survey and attach it with the observer's packet and forward a copy to the Captain for review.

Name of Observer _____

Deputy (Name and Badge #) _____

Date of Ride-Along _____

Shift _____ Shift Supervisor _____

Activity on Shift (especially unusual activity) _____

Notable questions or comments from Observer _____

Deputy's Comments _____
