

## Owensboro Police Department

Art Ealum Chief of Police 222 East Ninth Street
Owensboro, Kentucky 42303-3427
Telephone 270 687-8888
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In an effort to bring the police department and the community closer together, the Owensboro Police Department has initiated a citizen's Ride-Along Program. Interested citizens may ride-along with one of our officers during a portion of his/her day. In order to provide optimum safety to our participants, the following rules have been established.

Colonel Art Ealum Chief of Police

## CITIZENS REQUIREMENTS

- 1. No one under the age of seventeen (17) will be permitted to participate in the Ride-Along Program without specific authorization from the Chief of Police.
- 2. Before participating, citizens must complete the appropriate Ride-Along application.
- 3. The date for the ride-along will be set by a patrol supervisor upon receipt of the application. An effort will be made to schedule a participant on their requested day.
- 4. Participants must report to the Police Department thirty (30) minutes prior to their assigned time on the day assigned, and ask for the section supervisor or their designee.
- 5. Participants shall not carry cameras or recording equipment nor use cell phones during the ride-along unless it is an emergency.
- 6. Privileged and confidential information overheard during the ridealong shall not be discussed with anyone and, unless authorized, participants shall not review any official reports or records of the Owensboro Police Department.
- 7. Participants must remain in the patrol vehicle at all times unless otherwise directed, and obey any and all instructions/directions given by the officer.
- 8. Participants shall not carry weapons during the ride-along.
- 9. Participants may request that the ride be terminated at any time and be returned to the police administration building.
- 10. Participants must dress professionally (i.e. in addition to appropriate footwear; males should wear slacks, sport or dress shirt, sweater, coat with or without tie; females a dress, pants, shirt/blouse, pantsuit, etc.). Inappropriate dress, as determined by the section supervisor, will not be allowed.

| Name:   | DOB:                            |                               |                  |
|---|---------------------------------|-------------------------------|------------------|
| Printed Name of Applicant   |                                 |                               |                  |
| Address:  | City:                           |                               | , State:         |
| Telephone#:   | Driver's Licens                 | e Number:                     |                  |
| Have you (the applicant) ever been charge(s):                             | arrested? Yes                   | No <b>If yes</b> ,            | list date(s) and |
| NOTE: Misrepresentation of any ma   |                                 |                               | lt in your being |
| disqualified from participation in  |                                 |                               |                  |
| Please explain in writing why you w                                       | ant to participa                | te in the Ride-               | -Along Program:  |
|   |                                 |                               |                  |
|   |                                 |                               |                  |
|   |                                 |                               |                  |
|   |                                 |                               |                  |
|   |                                 |                               |                  |
|   |                                 |                               |                  |
|   |                                 |                               |                  |
| ***********   | * * * * * * * * * * * * * * * * | * * * * * * * * * * * * * * * | ******           |
| Applicants seventeen (17) years of<br>or guardian's permission to partici |                                 |                               |                  |
| Ι,  | have read the                   | release and ur                | nderstand all    |
| Parent/Guardian (Please Print)  |                                 |                               |                  |
| of its terms and give my permission                                       |                                 | plicant (Please               | to               |
|   |                                 |                               |                  |
| participate in the Owensboro Police                                       | Department Ride                 | -Along Program.               |                  |
|   | Signature of Pa                 | <br>rent/Guardian             |                  |
| ********  | ******                          | ******                        | :*****           |
|   |                                 |                               |                  |

The Ride-Along Program is designed to operate from 7:00 P.M. to 9:00 P.M., Monday through Saturday. Unless a specific officer is requested, the afternoon section supervisor, or their designee, shall assign the ride-along officer.

THE CIVILIAN RIDE-ALONG PROGRAM IS NOT DESIGNED TO BE A TRAINING PROGRAM FOR FUTURE EMPLOYMENT. CITIZENS ACCOMPANY OFFICERS FOR OBSERVATION AND KNOWLEDGE ONLY. AUTHORIZATION FOR CITIZENS TO PARTICIPATE IN THE RIDE-ALONG PROGRAM MAY BE GRANTED ONLY BY THE CHIEF OF POLICE OR HIS DESIGNEE.

## OWENSBORO POLICE DEPARTMENT RIDE-ALONG PROGRAM APPLICATION

| I,   |  | my heirs,  |  |
|--|--|--|--|
| administrators, and assigns, for and authorization by the Owensboro Police D City of Owensboro Police Officers in the purpose of observation, hereby agree to the control of the control o | epartment to ac<br>e course of the<br>o release and    | eir regular dutie<br>forever hold har                      | e with the<br>es for the<br>rmless the |
| Owensboro Police Department, City of Ow<br>and employees, and their successors,<br>assigns, from any and all such claims,<br>property damage that now or hereafter<br>"Ride-Along" Program and I further agree   | heirs, execut<br>, lawsuits, dem<br>may arise, from    | tors, administra<br>ands, personal i<br>m my participati   | tors, and<br>injury, or<br>on in the   |
| harmless the Owensboro Police Department<br>City of Owensboro, from any and all clai<br>litigation that may arise or be brought<br>result of my negligent acts or omissions<br>Owensboro Police Officers.  | ms, damages and against me or t                        | other liabilition of Owens!                                | es and any<br>boro, as a               |
| I, the undersigned, have read this rele<br>execute it voluntary and with full knowl<br>any and all rights I may have, if any,<br>Owensboro or individual employees thereof<br>as a result of my participation in O<br>Program.   | edge that by th<br>to assert any o<br>f, which I may h | e execution of i<br>claims against th<br>nave now, or in t | t, I waive<br>he City of<br>he future, |
| Signature of Applicant (or Parent/Guardia if Applicant is under the age of 18)   | nn Date  |  | , 20                                   |
| The completed application shall be sent at the address listed below. Participan about the Ride-Along program may forward   | ts that wish to  | critique or mak  | e comments                             |
| Attention: Ride-A<br>Support Services<br>Owensboro Police<br>222 East Ninth St<br>Owensboro, Kentuc  | Division Command<br>Department<br>creet                | der  |  |
| **********   | *****  | ******   | ******                                 |
| Departmental Use Only:   |  |  |  |
| Background investigation completed by:   |  |  |  |
| Applicant's criminal/driving record is:  | ☐ Clear  | ☐ Attached   |  |
| Reviewed by Support Services Division Com  | mander:  |  |  |
| Signature  | Dat  | e  |  |
|  |  |  |  |
| Approved Disapproved   | Chief of Police  | e or designee  |  |
| Assigned date of ride:(Day of Week)  | (Date  | <br>e)   |  |
| Ride-along completed by:   | (= 3.0   |  |  |
| Officer  | <br>Date   |  |  |