

# AVONDALE POLICE DEPARTMENT

## CITIZEN OBSERVER REQUEST

### WAIVER OF LIABILITY



**IF POLICE APPLICANT, PLEASE CHECK**

Last Name			First Name			Middle Name		
Alias/Maiden Name				Date of Birth			Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Street Address						City, State, Zip		
Home Phone #			Cell Phone #			Work / Business Phone #		
Do you require disability accommodations? <input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, please describe)								
Have you ever been arrested? <input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, please provide details)								
Are you on probation and/or parole for any criminal offense? <input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, please provide details)								
Are you currently in the application process for the City of Avondale? <input type="checkbox"/> No <input type="checkbox"/> Yes Which department?								
Please indicate your shift preference(s) below. If you list more than one, please indicate your 1st choice, 2nd choice, etc. A ride-along begins at the shift start time, as listed below. Please check-in 15 minutes prior to shift start time.								

**NOTE: This form must be received at least ten (10) working days in advance of the requested ride-along date.**

Squad	Time	Day of Week (check preference)								Date(s) Requested	Preference (1st, 2nd, etc.)
1	Fri-Mon 0500-1500	Sun <input type="checkbox"/>	Mon <input type="checkbox"/>	Tue	Wed	Thu	Fri <input type="checkbox"/>	Sat <input type="checkbox"/>			
2	Mon 0700-1700 Tue-Thu 0500-1500	Sun	Mon <input type="checkbox"/>	Tue <input type="checkbox"/>	Wed <input type="checkbox"/>	Thu <input type="checkbox"/>	Fri	Sat			
3	Tue-Fri 0700-1700	Sun	Mon	Tue <input type="checkbox"/>	Wed <input type="checkbox"/>	Thu <input type="checkbox"/>	Fri <input type="checkbox"/>	Sat			
4	Sat 0900-1900 Sun-Tue 1000-2000	Sun <input type="checkbox"/>	Mon <input type="checkbox"/>	Tue <input type="checkbox"/>	Wed	Thu	Fri	Sat <input type="checkbox"/>			
5	Tue-Thu 1200-2200 Fri 1100-2100	Sun	Mon	Tue <input type="checkbox"/>	Wed <input type="checkbox"/>	Thu <input type="checkbox"/>	Fri <input type="checkbox"/>	Sat			
6	Fri 1600-0200 Sat-Mon 1500-0100	Sun <input type="checkbox"/>	Mon <input type="checkbox"/>	Tue	Wed	Thu	Fri <input type="checkbox"/>	Sat <input type="checkbox"/>			
7	Tues-Fri 1500-0100	Sun	Mon	Tue <input type="checkbox"/>	Wed <input type="checkbox"/>	Thu <input type="checkbox"/>	Fri <input type="checkbox"/>	Sat			
8	Sat-Tue 2000-0600	Sun <input type="checkbox"/>	Mon <input type="checkbox"/>	Tue <input type="checkbox"/>	Wed	Thu	Fri	Sat <input type="checkbox"/>			
9	Wed-Fri 2000-0600 Sat 1800-0400	Sun	Mon	Tue	Wed <input type="checkbox"/>	Thu <input type="checkbox"/>	Fri <input type="checkbox"/>	Sat <input type="checkbox"/>			
10	Sun-Wed 1800-0400	Sun <input type="checkbox"/>	Mon <input type="checkbox"/>	Tue <input type="checkbox"/>	Wed <input type="checkbox"/>	Thu	Fri	Sat			

**WAIVER OF LIABILITY**

In consideration of being permitted to ride in the motor vehicles of the City of Avondale Police Department, I hereby release and agree to hold harmless the said Department, its employees and agents from any and all liability for any damage or injury, which I may receive while riding upon said motor vehicles, or receive accompanying City of Avondale Police Officers from any cause whatsoever. This release of liability and agreement given by me to the Avondale Police Department, its employees and agents shall apply to any right of action that might apply to me, my heirs, and my personal representatives. Further, I agree to assume all risks in riding in the said Avondale Police Department vehicles and in accompanying its Officers and am fully aware personal damage may be involved. I acknowledge that the Police Officers will be engaging in a variety of law enforcement activities during the Citizen Observer Program. I fully understand the requirement to comply with the directions of the Officer at all times. I acknowledge that civilian observers are not permitted to make any recordings, visual or audio, while participating in the Citizen Observer Program, unless prior permission has been obtained from the Chief of Police or designee. I also acknowledge that civilian observers are not allowed to participate in the Citizen Observer Program more than once every six months and that a civilian observer may not ride for longer than the assigned patrol shift. I also understand that any person approved to participate shall be suitably dressed in a collared shirt, blouse or jacket, slacks and closed toe shoes. Sandals, t-shirts, tank tops, shorts, and ripped or torn blue jeans are not permitted. The Patrol Lieutenant or field supervisor may refuse a ride-along to anyone not properly dressed. Additionally, I understand and accept the risks of riding with an Officer who may be performing activities which include a degree of risk to my personal safety.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**CITY OF AVONDALE POLICE DEPARTMENT USE ONLY**

PARTICIPANT ELIGIBILITY			
Local Files: <input type="checkbox"/> Negative <input type="checkbox"/> See Attached	<input type="checkbox"/> APPROVED	Sergeant Signature / Badge #:	
ACIC/NCIC: <input type="checkbox"/> Negative <input type="checkbox"/> See Attached	<input type="checkbox"/> DENIED		
City Bookings: <input type="checkbox"/> Negative <input type="checkbox"/> See Attached			
HOST OFFICER AVAILABILITY			
Availability of Host Officer: <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	Approved by Sergeant / Badge #:	Shift / Squad:	
Scheduled Date of Ride-Along:	Officer Assigned:		
CITIZEN NOTIFICATION			
Date / Time Notification Made:	Notification Made by:	Comments:	

## **REQUIREMENTS FOR PARTICIPATION IN THE CIVILIAN OBSERVER (RIDE-ALONG) PROGRAM**

**Appearance:** As a civilian observer riding with uniformed personnel in an Avondale Police Department vehicle, members of the public may assume the civilian observer is in some way affiliated with the department. As such, all civilian observers are required to wear, at a minimum, business casual attire (i.e., dress slacks, dress shirt, polo shirt, dress shoes, etc.). Civilian observers must also not exhibit an appearance that is detrimental to the image of the Avondale Police Department. Failure to conform to these appearance guidelines will result in the cancellation of the ride-along.

**Requirements:** Civilians that do not complete and sign the “Waiver of Liability”, which is printed on the reverse of this page, will not be authorized to take part in the Citizen Observer Program. This form shall be maintained by the Avondale Police Department.

- Civilians who are on criminal probation or parole will not be permitted to ride with an officer.
- Unless the civilian observer is a certified Arizona peace officer, no civilian observer may carry any weapon.
- Civilian observers are not allowed to participate in the Civilian Observer Program more than once every six months. In addition, a civilian observer may not ride for longer than the assigned patrol shift.
- The civilian observer will not become involved at any time in any police action but shall call for help upon officer incapacitation.
- Civilian observers are not permitted to make any recordings, visual or audio, while participating in the Civilian Observer Program, unless prior permission has been obtained from the Chief of Police or designee.
- Host officers may request a supervisor terminate a ride-along due to the civilian observer’s willful non-compliance with rules and regulations. Any supervisor, at his/her discretion, may cause or permit the termination of the ride-along at any time at the request of either the host officer or the civilian observer.
- Civilian observers are not permitted to accompany officers into residences or non-public area of businesses, without consent of the owner or person with authority over the premises. Consent to enter must be obtained voluntarily prior to entry and should be requested by the host officer.

# Citizen Ride Along Program Comments

Thank you for participating in the Citizen Ride Along Program with the Avondale Police Department. Your comments regarding your experience during the time you spent with a member of our Department are of great value to us. Please take a moment to provide us with feedback on your experience.

Host Officer's Name:
Day/Time of Participation:

First Impression:
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Knowledge, Efficiency, Approach of the Officer and Other Staff:
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General Observations and Suggestions:
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