

Name of Applicant: \_\_\_\_\_

# Milton Police Department

37 Bombardier Road

Milton, Vermont 05468



## Ride – Along Program

## Application

# Town of Milton Police Department

## Ride-Along Program Eligibility & Application Procedure

### A. Program Eligibility

Applicants for the ride along **program must meet one of the following** criteria to participate in the program:

1. Currently reside within the limits of the Town of Milton.
2. Be a member of a civic organization or employee of a business located within the Town of Milton.
3. Be employed by the Town of Milton in a position that would be facilitated by knowledge of departmental procedures and functions.
4. Be a police employee applicant with the Town of Milton Police Department or have current employment in the law enforcement field with another agency.
5. Be a law enforcement explorer scout with this or any other police explorer post.
6. Be a member of the family of an employee of this department.
7. Demonstrate a special interest for participation that would benefit the police department, city government, or its citizens.

## **B. Application Procedure**

### **1. Adult Applicants**

Applicants must complete a Ride-Along Program Application and submit the completed application to the police department **at least five (5) business days** prior to the expected Ride-Along date.

Do NOT sign the Waiver Section of the application. **You will be required to sign this section in the presence of a police officer when you report** for your Ride-Along.

You **must** have your driver's license or other valid photo identification with you when you report for your Ride-Along.

### **2. Juvenile Applicants – You must be at least 15 years of age to participate in this program.**

Follow all application instructions and have your parent/guardian sign the Waiver Section on page 4 **prior to** submitting the application. The Ride-Along Coordinator may call your parent/guardian to verify their approval of your Ride-Along.

When you arrive for your Ride-Along you will be asked to sign the Waiver Section in the presence of an officer.

**Once you have completed ALL sections, turn the entire application into the Police Department at 37 Bombardier Road, Milton, VT 05468**

**If you have questions, please call (802) 893-6171.**

## **Town of Milton Police Department Ride-Along Program Application**

**To the Ride-Along Applicant:**

You are required to complete this application after reading the rules and regulations on page 3 of this application. By signing this application you acknowledge that you have read, understand and are willing to comply with these rules and regulations. You will be required to sign the Waiver Section on Page 4 in the presence of a Police Officer when you report for your Ride-Along.

If you are under the age of 18, your parent or guardian must cosign this page of the application indicating they too have read, understand and agree with the conditions placed on your participation in this program. Your parent/guardian also needs to sign the Waiver Section on Page 4 prior to turning the application into the department. Your parent/guardian may be telephoned prior to your Ride-Along to verify their approval. You will have to sign the Waiver Section on Page 4 in the presence of a police officer when you report for your Ride-Along.

No application will be processed unless all the required information is provided and you have signed the bottom of this page. Once your application has been processed you will be contacted prior to your requested Ride-Along date by telephone or by e-mail and informed if your application has been approved. All telephone notifications will be made to the telephone number indicated by you on a weekday between the hours of 9:00 a.m. and 4:00 p.m.

This is a voluntary program conducted in the interest of public enlightenment. The Police Department reserves the right to limit or exclude any person from participation in this program when it is deemed by the Department that the person's participation would not be in the best interest of the police department, of any of its individual members, or the public, or when it might reasonably be construed that a conflict of interest may exist between the applicant and the police department or its mission.

**Your Full Name:** \_\_\_\_\_

**Your Home Address:** \_\_\_\_\_

**Your Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Age:** \_\_\_\_ **Drivers License #:** \_\_\_\_\_

**Home Telephone:** \_\_\_\_\_ **Work Telephone:** \_\_\_\_\_

**Your E-mail Address(s):** \_\_\_\_\_

Are you a member of a civil association or Town business employee? If yes, give name and position in organization? \_\_\_\_\_

Using the Program Eligibility List in Section A on Page 2, write your eligibility group number here:

Reason you request to ride: \_\_\_\_\_

Date you request to ride: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hours of ride (four-hour time limit):  
From: \_\_\_\_\_ to \_\_\_\_\_

Is there a specific police officer you would like to ride with? \_\_\_\_\_

Have you previously ridden with this department? No: \_\_\_\_\_ Yes: \_\_\_\_\_

If Yes, Number of times: \_\_\_\_\_  
(Generally, you are limited to 2 rides per calendar year)

Have you previously been refused participation in this program? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Approximate date? \_\_\_\_\_

Reason for refusal: \_\_\_\_\_

Are you currently involved in any potential legal process arising from any traffic or criminal matter as a defendant, plaintiff, or witness? No: \_\_\_\_\_ Yes: \_\_\_\_\_

If Yes, explain: \_\_\_\_\_

Who may we contact in the event of any emergency during your Ride-Along?

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

I affirm that the information provided in this application is true and correct to the best of my knowledge and belief:

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

Signature of parent or guardian: \_\_\_\_\_  
(For applicants under age 18)

Telephone of parent or guardian: \_\_\_\_\_  
(home) (work)

# Ride-Along Program

## **MILTON POLICE DEPARTMENT RIDE-ALONG PROGRAM RULES AND REGULATIONS**

The Milton Police Department provides citizens the opportunity to view police operations from the officers perspective, the chance to increase citizen participation and involvement with police services, and to improve citizen/officer relationships through the program.

The Ride-Along program is designed to accommodate all persons 15 years of age and older. Every person desiring to ride shall be provided the opportunity unless it is determined that allowing that particular person to participate would constitute a hazard to the person, the officer, or the community.

### **REGULATIONS**

No person convicted of a felony will be allowed to participate in this program. Misdemeanor convictions will be decided on a case-by-case basis.

All Ride-Along applications must be submitted at least 5 days in advance of the Ride-Along. (Milton Police Department employees and officers from other jurisdictions are exempted from this time limitation.)

Any person wishing to participate in the ride-along program must sign a waiver form. The waiver forms are available at the records office. Persons under 18 shall sign the waiver themselves, along with one parent or guardian.

Sworn law enforcement officers from other jurisdictions may ride on routine patrol at the discretion of the Shift Supervisor.

Citizens under 18 years of age are limited to riding between 6:00 a.m. and 10:00 p.m.

Ride-Along participants must wear safety belts while riding in the police department vehicles.

Observers are expected at the Police Department at their scheduled time and will be returned to the Department prior to the end of the Ride-Along. Exceptions will be made if the observer desires to be returned to the Department prior to the scheduled end of the Ride-Along. Participants are asked to notify the shift supervisor if they are unable to meet their scheduled time.

Attire is casual business. No shorts, cutoffs, t-shirts, tank tops, jeans or sandals. Men's shirts must have collars. Shoes are required. Make sure you bring appropriate outerwear based on weather and temperature.

Questions regarding procedures and activities are welcomed but must be done at an appropriate time. Observers shall not interfere with the officer's activities at any time.

Observers shall not participate in any police activity unless specifically directed by the officer.

Observers shall not leave the patrol car at any time without first obtaining permission of the officer.

Participants are riding in the capacity of an observer only and are under complete control of the officer at all times. The officer is responsible to properly control and direct their activities during the ride. The officer shall exercise discretion to provide the highest level of safety and protection to the rider.

On the date of your Ride-Along, you must report to the Milton Police Department at least 15 minutes prior to your scheduled Ride-Along time.

You must bring your driver's license or other photo identification with you when you report for your Ride-Along. Juveniles who report with their parent/guardian do not have to bring such identification, only their parent/guardian needs identification.

The shift supervisor may terminate your Ride-Along at any time if in their opinion, your continued participation presents an undue risk, or your conduct, deportment or sobriety is such that your continued participation is not in the best interest of the department. A complete report will be forwarded to the Police Chief of the reasons for termination.

Extensions of Ride-Along time limits may only be made with the approval of the shift supervisor. The shift supervisor will designate with whom you will ride.

You are prohibited from carrying with you during the Ride-Along any flashlight, camera, any type of radio, tape recorder or player, binoculars, or any similar device. Participants, including holders of Concealed Carry Permits, are prohibited from carrying any weapon, personal chemical protection device, or restraining device of any kind.

Participants are observers. You will not exit the police vehicle during any police activity unless directed to do so by a police officer. You will refrain from direct involvement in police functions or conversations with violators, suspects, arrestees, witnesses, complainants, or other members of the public encountered during the course of the official duties of the police officer with whom you are riding.

You may be asked to temporarily interrupt your Ride-Along during hazardous or unusual circumstances. You will immediately comply with such requests and otherwise obey the direction of the police officer with whom you are riding.

**I have read and understand the above rules and regulations.**

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Signature

**Milton Police Department**  
**WAIVER OF CIVIL LIABILITY AND INDEMNIFICATION AGREEMENT**

In consideration of the Town of Milton Police Department (hereinafter "Police Department") granting me permission to accompany a member of the Police Department as an observer in the Ride-Along Program, I hereby waive any and all rights and claims of liability for damages, losses, personal injuries or death which I might suffer, sustain or cause while participating in the Ride-Along Program. I further waive any and all claims, demands, actions, damages, or suits at law or equity of whatever nature which I have or may hereafter acquire against the Town of Milton, its Police Department, its elected officials, officers, agents or employees, as a result of my voluntary participation in the Ride-Along Program; and I hereby hold harmless such persons and entities and or persons set for the herein, I agree to indemnify those persons and/or entities for all damages, attorney fees and costs incurred in defending said demand or claim.

I further agree to comply with all rules and regulations of the Ride-Along Program and any instructions or orders issued by members of the Police Department in connection with the Ride-Along Program. I certify that I am aware of the potential risk involved in accompanying a Police Officer during the performance of his/her duties.

**\* \* \* DO NOT SIGN THIS WAIVER NOW \* \* \***  
*(You will sign this section prior to your Ride Along)*

**You will be required to sign the Waiver in the presence of a police officer when you report for your Ride-Along. Please ensure you have your drivers license or other form of photo identification with you when you report for your Ride-Along.**

I hereby acknowledge that I fully understand the consequences of this waiver and that it is voluntary and intelligent act on my part.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(Signature) (Printed Name)

Identification Verified and Signature Witnessed by: \_\_\_\_\_  
(Officer)



**IF APPLICANT IS UNDER 18 YEARS OF AGE**  
**THE BELOW SECTION MUST BE COMPLETED PRIOR TO SUBMITTING APPLICATION**

I am the parent or legal guardian of \_\_\_\_\_ who is requesting to participate in the Ride-Along Program of the Town of Milton Police Department. I hereby give my permission for this Ride-Along and agree to all of the terms set forth in the Ride-Along Application.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature of Parent or Guardian Printed Name Date

Daytime Phone Number: \_\_\_\_\_



**DO NOT WRITE ON THIS PAGE – FOR DEPARTMENT USE ONLY**

**APPROVAL / DENIAL**

**TO:** \_\_\_\_\_  
(Applicant's Name)

**FROM:** \_\_\_\_\_ **Chief of Police or Designee**

Ride-Along applicant, named above has been approved to participate in the Ride-Along program pursuant to the program rules and Departmental Regulations and under your continued supervision and approval.

Ride-Along applicant, named above is not approved to participate in the Ride-Along program. Reason for refusing application:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**VERIFICATION OF PROGRAM PARTICIPATION**

**TO:** \_\_\_\_\_ **Chief of Police or Designee**

**FROM:** \_\_\_\_\_

The above named participant:

Had their identification verified, signed the Ride-Along Waiver in the presence of an officer and rode from \_\_\_\_\_ hours until \_\_\_\_\_ hours with Officer \_\_\_\_\_.

Had their Ride-Along time period altered. State reason of time extension or curtailment.  
\_\_\_\_\_  
\_\_\_\_\_

Did not appear for the scheduled ride along.

Canceled their request to participate prior to riding and provided the following reason:

**This application will be retained for one year.**