

CALIFORNIA STATE UNIVERSITY SACRAMENTO

**DI 6@7 G5: 9HM# B-J 9F G-HMDC@79**

RIDE-A-LONG PROGRAM APPLICATION

BE SURE TO FILL OUT EVERYTHING

Print Name (Last,First,Middle) (Maiden)		Social Security Number					Date	
Street Address		City	State	Zip Code		Residence Phone		
Driver's License Number	Sex	Race	Age	Date of Birth (Mo/Day/Year)	Height (Ft. In)	Weight	Hair	Eyes
Occupation	Name of Employer/School					Business Phone		
Do you have any past arrests or pending court cases? No <input type="checkbox"/> Yes <input type="checkbox"/> List Date, Agency, Charge, and Disposition Attach additional sheets if necessary.								
Why do you want to participate on a Ride-A-Long? Who recommended that you participate? (Ex: Police Officer, School Instructor, self, etc.)								
Do you have any physical limitations? No <input type="checkbox"/> Yes <input type="checkbox"/> <input type="checkbox"/> High Blood Pressure <input type="checkbox"/> Heart Condition <input type="checkbox"/> Nervous or Mental Condition <input type="checkbox"/> Other (List)								
List previous participation in any Ride-A-Long Program. Include the agency and date participated.								
Requested Day/Shift of Participation – Indicate (✓) as many as practical								
<i>Shift</i>	<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>	
Graveyard/Late								
Day								
Swing/Evenings								

**Background Authorization**

I understand that a criminal check and a warrant check will be conducted as part of the application process. I hereby authorize any law enforcement agency, agencies of the government of the United States of America, and agencies of the State of California to release to the CSU, Sacramento Police Department any and all information which said agencies or any of them have about me, for the limited purpose of aiding the CSU, Sacramento Police Department in evaluating my eligibility for participation in the Ride-A-Long Program. This release extends to any and all information, which said agencies, or any of them may have about me, whether public, personal, or confidential. I understand that I will not receive and am not entitled to know the contents of confidential reports received from these agencies, and I further understand that these reports are privileged. I hereby release, discharge, and agree to hold harmless the agencies, their agents and representatives and any person furnishing information from any and all liability of every nature and kind arising out of the furnishing and inspecting of such documents, records and other information, and this release shall be binding on my legal representatives, heirs and assigns.

**READ THIS DOCUMENT COMPLETELY BEFORE SIGNING**

\_\_\_\_\_  
Signature of Applicant

*""Eqpwpwgf 'qp 'lgeqpf 'tci g00*

*For Departmental Use Only*  
Date/Time to Ride \_\_\_\_\_

Supervisor: \_\_\_\_\_ Officer(s): \_\_\_\_\_

**INDEMNITY AND HOLD HARMLESS AGREEMENT**

Whereas the undersigned

- being an employee or agent of CSU, Sacramento
- not being a member, employee or agent of the CSU, Sacramento Police Department or the City of Sacramento

has made a voluntary request for permission to ride as a guest or observer in a law enforcement vehicle at a time when such vehicle is operated and staffed by members of the CSU Sacramento Police Department and has further requested permission to accompany a member or members of said law enforcement department during the active performance of their official duties as Police Officers;

Now, therefore, in consideration of CSU, Sacramento, a State University, by and through its Police Department, cooperating in making available to the undersigned the necessary personnel and the use of its vehicles and other facilities for the aforesaid purpose, the undersigned expressly agrees to and knowingly hereby does assume all risks arising in the course of said activity. The undersigned specifically agrees to indemnify and hold harmless the University, its officers, agents and employees from and against any and all claims, loss, damage and liability for injury to the undersigned person or property including any such claim, loss, damage and liability caused by the negligence of the University, its agents, officers, and employees. The undersigned also specifically agrees to indemnify and hold harmless the University, its officers, agents and employees from and against any and all claims, loss, damage and liability for injury to the person or property of another or others, directly or indirectly caused by the undersigned's misfeasance or malfeasance occurring while riding as a guest or observer in any CSU, Sacramento Police Department vehicle or while accompanying a member of said department during the active performance of his or her official duties as a peace officer.

**READ THIS DOCUMENT COMPLETELY BEFORE SIGNING**

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 Uli pcwtg'qhCrr nlecpv< \_\_\_\_\_

**Hqt 'Rqileg'F gr ct vo gpv'Wig'Qprf**

<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Sergeant	Date	<input type="checkbox"/> DL OK <input type="checkbox"/> City Clear
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Lieutenant	Date	<input type="checkbox"/> DL OK <input type="checkbox"/> City Clear
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved		Date	<input type="checkbox"/> DL OK <input type="checkbox"/> City Clear
<b>Comments:</b>			

