



SHERIFF

LINCOLN COUNTY, COLORADO

Date and Time Ride Along Requested:		From:	AM/PM	To:	AM/PM
Last Name:		First Name:	MI:		
Date of Birth:		Occupation:	Phone:		
Address:		City, State, Zip			
Purpose of Ride Along Request:					
Signature:			Date:		

You are hereby granted permission to ride in a Sheriff's vehicle of the County of Lincoln at such times and in such districts as may be approved by the Sheriff or his designated representative. Tom Nestor, Sheriff	Approved by:
	Denied by:
	Date:
Remarks:	

Responsibility of the person riding along:

- A) Persons riding along in Sheriff Vehicles
 - a. Should dress appropriately by wearing business casual attire. If the deputy feels you are dress inappropriately, you will not be allowed to ride.
 - b. Will not enter any investigation or converse with any witness or prisoner concerning a deputy's incident or investigation.
 - c. Will not operate any deputy's equipment, vehicle or handle anything related to a deputy's investigation. In case of an emergency, the deputy may ask for assistance as authorized under law.
- B) Citizen ride-alongs must comply with orders from deputy. Under the direction of the deputy, the ride-along may be required to remain in the patrol vehicle on certain calls. If a ride-along fails to obey a direct order of a deputy, it may result in permanent termination of the ride along privilege.
- C) Ride along requests are restricted to once every six months.
- D) The ride along requests date should be at least 72 hours form the time of the application. Approval time is typically 3-5 days.

WAIVER (to be witnessed by a Lincoln County Sheriff's Office department representative)

(Name)

of

(full address)

For myself and my heirs. Executors. Administrators, agents, and assigns do hereby waive all clams, demands, actions, cause of action or suits of any kind or nature whatsoever against the County of Lincoln, the Lincoln County Sheriff's Office, or any agent or employee of Lincoln County or the Lincoln County Sheriff's Office action under the color of his/her official authority, arising from any occurrence while I am riding in a deputies vehicle of the Lincoln County Sheriff's Office or while I am observing the deputies acting under the color of their authority co-incident with riding in a deputies vehicle. I am aware that I have voluntarily sought permission to ride in a deputy's vehicle and that during the time that I am riding in such a vehicle and observing the deputies the deputy and vehicle will be engaged in law enforcement activities, so of which will be dangerous and expose me to the risk of harm.

I hereby declare that I have read, understood, and voluntarily accepted the terms and risks stated in the foregoing paragraph.

IN WITNESS WHEREOF, I SET MY HAND THIS _____ DAY OF _____ : 20_____

Signature: _____

Witnessed by representative of the Lincoln County Sheriff's Office

Printed Name: _____

Signature: _____

PARENTAL CONSENT FOR MINORS

Relationship: _____

Printed Name: _____

Signature: _____ Date: _____



Ride-Along Questionnaire

Name: _____ D.O.B. _____

Driver's License # _____ State: _____

Have you ever been arrested? ☐ Yes ☐ No

If yes, please explain:

Have you ever been the subject of a criminal investigation? ☐ Yes ☐ No

If yes, please explain:

Have you ever had any involvements in gangs, or do you have any friends, associates, or relatives that have been involved in gangs? ☐ Yes ☐ No

If yes, please explain:

What experiences have you had with law enforcement?

☐ Positive ☐ Negative ☐ None

Please explain:

I CERTIFY THAT THE INFORMATION IN THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I ALSO GRANT PERMISSION FOR THE LINCOLN COUNTY SHERIFF'S OFFICE TO VERIFY THE ABOVE INFORMATION CONTAINED IN THIS APPLICATION AND CHECK FOR PRIOR CRIMINAL HISTORY.

Signature: _____ Date: _____

LINCOLN COUNTY SHERIFF'S OFFICE Ride Along Application Instructions

- A. The Ride Along Application must be completed and submitted to the Lincoln County Sheriff's Office at 103 3rd Ave, Hugo, Colorado or faxed to 719-743-2392.
- B. You must sign the waiver in the presence of a Sheriff's Office representative. If you submit your application by mail, you can sign your waiver at the time of your ride along in the presence of the deputy with whom you will be riding.
- C. Individuals less than 18 years of age on the scheduled ride-along day must be signed by a parent or legal guardian meeting the guidelines indicated above. The minimum age for ride-alongs is 16 years of age. Waiver of this rule shall be approved by the Sheriff or Undersheriff.
- D. Please allow 3-5 days to process your ride-along application and to schedule your ride-along.
- E. The Sheriff's Office will make every effort to accommodate your request for a ride-along, however not all requests can be accommodated. Please allow for some flexibility in scheduling.