

Linn County Sheriff's Office

Ride – Along Program Information

GENERAL INFORMATION

Linn County Citizens 18 years of age or older (14-18 years of age with signed parent/guardian permission on a case by case basis) can apply to ride for up to four hours with a Criminal Patrol Deputy up to one time during a calendar year. If you are a Linn County Citizen and are free of the following disqualifying conditions, you are welcome to complete a ride-along application, submit by mail or in person at the Linn County Sheriff's Office. Allow approximately four weeks for application processing and routing before you are contacted to schedule the date and time for your ride-along.

DISQUALIFYING CONDITIONS

- Felony conviction
- Misdemeanor conviction in the last four years
- Currently on any form of pre-trial release
- Ever committed to the Mental Health and Developmental Disability Services Division, or ever found to be mentally ill
- Outstanding warrants
- In the jurisdiction of the juvenile court for less than three years for having committed an act which, if committed by an adult, would constitute a felony or a misdemeanor involving violence

Denial may be made if motives for riding are determined not to be in the best interest of the applicant and/or Sheriff's Office.

RULES OF CONDUCT

The Ride-Along program follows established guidelines for the protection of the citizen observer. Deviation from these guidelines without the expressed consent of the host deputy sheriff's is cause for immediate termination of the ride-along.

1. All information and observations acquired by the citizen observer during the ride-along shall be considered strictly confidential unless otherwise stated by the host deputy sheriff.
2. The citizen observer must realize that any action he/she witnesses during the ride-along may require a court appearance at a later date.
3. Under no circumstances shall a citizen observer:
 - a. Be permitted to carry any weapon unless authorized and approved by the shift supervisor.
 - b. Operate the patrol vehicle.
 - c. Act as an agent for the Sheriff's Office or otherwise perform any Sheriff's Office-related duty.
 - d. Approach any vehicle on a traffic stop or approach any residence, building or other situation where the potential for violence exists or a crime is in progress.
 - e. Enter any crime scene of a serious nature (such as a homicide) and/or touch, possess, tamper with, or otherwise have contact with any evidence.

SAFETY CONSIDERATIONS

The physical safety of the citizen observer is of the utmost importance; therefore, the host deputy sheriff shall weigh situations for potential hazards when responding to calls.

In cases of possible extreme danger (i.e. person with gun), the citizen observer may be let out of the patrol vehicle at a safe distance from the area unless qualified to assist. In situations with a potential for violence (fights, family disturbances, ect.) the citizen observer shall remain in the patrol vehicle unless qualified to assist.



LINN COUNTY SHERIFF'S OFFICE

Bruce W. Riley, Sheriff

1115 S.E. Jackson Street
Albany, OR 97322
Phone: 541-967-3950
www.linnsheriff.org

RIDE - ALONG PROGRAM APPLICATION

Full Name: _____

List any other names you have used: _____

Date of Birth (day/Month/Year): _____ SSN: _____

Driver's License Number: _____ State of Issue: _____

Address (Number, Street & Apt #): _____

Home Phone Number: _____ Work Phone Number: _____

Cellular Phone Number: _____ Pager: _____

Have you applied for an employment position with the LCSO: yes no

I hereby request permission to ride as a civilian observer in a Sheriff's Office patrol vehicle because: _____

I further agree with, and voluntarily sign the Release and Hold Harmless Agreement.

Please list three choices for days of the week, and times of the day during which you would like to ride with a Deputy.

1st Choice: Mon Tue Wed Thu Fri Sat Sun: Morning/Day Evening/Night

2nd Choice: Mon Tue Wed Thu Fri Sat Sun: Morning/Day Evening/Night

3rd Choice: Mon Tue Wed Thu Fri Sat Sun: Morning/Day Evening/Night

Signature: _____ Date: _____

(FOR OFFICIAL USE ONLY)

Date received: _____ Checks/Initial Data Entry/Hold Harmless Files

Approved/Denied: _____ Supervisor: _____ By: _____

(PATROL)

Deputy Assigned: _____

Date/Time (3) scheduling attempts: _____

Date/Times (i.e. 10/21/12 1800-2300) of ride-along: _____

(RETURN TO ADMINISTRATIVE SERGEANT)

LINN COUNTY SHERIFF'S OFFICE

Ride-Along Program

RELEASE AND HOLD HARMLESS AGREEMENT

In consideration of being permitted to ride in a vehicle owned and operated by the County, for the expressed purpose of observing operations and facilities of the Sheriff's Office, the undersigned agrees to release and hold harmless the County, its agents, employees, and elected officials from any and all liability to me for personal injury, death or any property damage, whether proximate or remote, sustained during or as a result of my ride as an observer.

I understand that I will be a guest passenger in the vehicle in which I ride and have not offered any payment to the Sheriff's Office or its employees for the opportunity to ride. I further understand that I may be summoned as a witness in any proceeding as a result of my observations. This observation is for my educational benefit. At all times, I agree to obey all orders, instructions and commands of the deputy sheriff of the Sheriff's Office. I fully realize and appreciate the basic nature of law enforcement and the possibility that situations may arise which might result in my exposure to danger of physical harm or injury, including traffic accidents, and I am willing to accept these risks. I further agree to keep confidential anything which I may observe or hear. I understand that my observation ride may be terminated at any time without notice.

I authorize the Sheriff's Office to conduct a complete records check of me prior to riding and understand that nay information of an adverse or criminal nature may disqualify me.

I freely and voluntarily sign this Release and Hold Harmless Agreement in sole reliance of my own independent judgment.

Signature of Applicant

Printed Name

Date

PARENTAL ENDORSEMENT (For applicants under age of 18): I have read and understand the Release and Hold Harmless Agreement and agree to be bound to its provisions as they apply to my son/daughter _____. I agree to assume full responsibility for my son/daughter as it would pertain to the provisions set forth.

Parent/Guardian Signature

Printed Name

Date