

Appendix A



FAUQUIER COUNTY SHERIFF'S OFFICE

78 West Lee Street, Warrenton, Virginia 20186 • Office: (540) 422-8600 • Fax: (540) 422-8605

**FAUQUIER COUNTY SHERIFF'S OFFICE
RIDE-ALONG APPLICATION**

Please read, fill out pages, sign and return to the Commander of the Patrol Division

Incomplete applications will not be processed

Once your application has been processed, you will be contacted by telephone and informed if your application was approved. This is a voluntary program conducted in the interest of public enlightenment. The Fauquier County Sheriff's Office reserves the right to limit or exclude any person from participation in this program.

Name: _____ Date of Birth: _____
 Last Middle First

Soc. Sec. # _____ Male or Female (Circle one)

Home Address: _____
 Street City State Zip

Home Phone: () _____ Work Phone: () _____

Occupation: _____

Are you a member of a civic association or business employee? Yes _____ No _____ (If Yes, give name and position in organization): _____

Have you previously ridden with this office? Yes _____ No _____ (If Yes, list the reason(s) and date(s): _____

Have you previously been refused participation in this program? Yes _____ No _____ (If Yes, list the date(s) and reason(s) for refusal):

Describe your reason(s) for wanting to participate in the Ride-Along Program:

Are you currently involved in any potential legal process arising from any traffic or criminal matter as a defendant, plaintiff, or witness? Yes _____ No _____ (If Yes, explain):

Do you have any medical conditions that might affect your ability to participate in this program? Yes _____ No _____ (If Yes, explain):

Have you ever been arrested? Yes _____ No _____ (If Yes, explain)

Instructions to Ride-Along Applicants

Applicants must meet one of the following criteria to participate in the Ride-Along program:

1. Be a representative of a business or civic group.
2. An applicant for a sworn Deputy Sheriff position of the Fauquier County Sheriff's Office, any sworn law enforcement officer from a certified agency in or out of the Commonwealth of Virginia.
3. Resident of Fauquier County (excluding sworn law enforcement personnel.) Non-Residents may be eligible on a case-by-case basis.

4. At least 14 years of age.
5. An approved college student intern.
6. A member of Explorer Post 1077, who is in good standing, dayshift only, no more than 4 hour increments.
7. A member of the Office Chaplain's Program.

In the event of an emergency, the following person may be contacted:

Name: _____

Relationship: _____

Address: _____

Phone: _____

Appendix B



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FAUQUIER COUNTY SHERIFF'S OFFICE RIDE-ALONG PROGRAM RULES AND REGULATIONS

1. All applicants must have a good record (criminal and traffic) and be of good character.
2. A person is not permitted to participate in the Ride-Along Program more than twice within a twelve (12) month period unless permission is received from the Sheriff or designee.
3. All Ride-Along participants are required to conduct themselves in a mature, professional matter at all times.
4. All Ride-Along participants will meet the Patrol Division shift supervisor at least 15 minutes prior to the scheduled time of the Ride-Along at the Sheriff's Office, 78 W. Lee St., Warrenton, VA 20186.
5. The shift supervisor will designate with whom the applicant will ride. The shift supervisor or may terminate the participant's Ride-Along at any time, if in his/her opinion, the continued participation presents an undue risk, or the participant's conduct, deportment, or sobriety is such that continued participation is not in the best interests of the Fauquier County Sheriff's Office.
6. The Ride-Along program shall be conducted at times which have been approved and shall not extend past 0200 hours. (Excluding Sworn Law Enforcement Personnel.) The hours of the participant's Ride-Along will be established prior to the approval of the application. These time limits may be terminated at the request of the applicant. Extensions of Ride-Along time limits may only be made with the approval of the shift supervisor or their supervisor.
7. Ride-Along participants are prohibited from carrying with them, during the Ride-Along, any flashlight, camera, radio of any type, tape recorder or player, binoculars, or any similar device unless specifically authorized by the Patrol Division Commander, Sheriff or designee.

8. No participants will not be permitted to carry weapons or restraining devices of any kind. Exceptions may be made for law enforcement officials authorized by the Virginia Code.
9. Ride-Along participants are prohibited from using any type of tobacco product during the course of the Ride-Along.
10. Participants are observers. They will not exit the vehicle during any law enforcement activity unless directed to do so by the Deputy Sheriff. They will refrain from direct involvement in the functions or conversation with violators, suspects, arrestees, witnesses, complainants, or other members of the public encountered during the course of the official duties of the Deputy Sheriff with whom the participant is riding.
11. Participants may be asked to temporarily interrupt their Ride-Along during hazardous or unusual circumstances. Participants will immediately comply with such requests and otherwise obey the directions of the Deputy Sheriff with whom the participant is riding.
12. During the course of the Ride-Along, the participant may be exposed to privileged information. The participant WILL NOT divulge any of the privileged information.
13. Participants are required to dress in casual business attire during their Ride-Along. Acceptable dress for men includes suits, sport coat and slacks, or collared shirt and slacks. Women may wear the preceding or a dress or pant suit. Jeans, shirts without collars, or tee shirts are not permitted. No open toe shoes or sandals are permitted.
14. Participants who are family members of the Fauquier County Sheriff's Office will not ride with the Deputy whom they are related to.

I agree to comply with all rules and regulations of the Ride-Along Program and any instructions or orders issued by members of the FCSO in connection with the Ride-Along Program.

Signature of Applicant

Date: _____

Printed Name of Applicant

Witness: _____



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FAUQUIER COUNTY SHERIFF'S OFFICE FAUQUIER, VIRGINIA WAIVER OF CIVIL LIABILITY AND INDEMNIFICATION AGREEMENT

In consideration of the Fauquier County Sheriff's Office, Virginia (hereinafter "FCSO") granting me permission to accompany a member of the FCSO as an observer in the Ride-Along Program, I hereby waive any and all risks and 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 County of Fauquier, the FCSO, Deputies, agents, or employees as a result of my voluntary participation in the Ride-Along Program, and I hereby hold harmless such persons and entities. In the event that a demand or claim, whether groundless or otherwise, is made against the entities and/or persons set forth 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 FCSO in connection with the Ride-Along Program. I certify that I am aware of the potential risk involved in accompanying a Deputy Sheriff during the performance of his/her duties.

I hereby acknowledge that I fully understand the requirements and responsibilities of participants in this program, of potential risk involved when accompanying a Deputy Sheriff during the performance of their duties and am also aware of the consequences of this waiver and that it is a voluntary and intelligent act on my part. I further agree unconditionally to hold harmless Fauquier County, the Sheriff's office and all employees in the event of injury, or accident during my participation in this program.

Signature of Applicant

Printed Name of Applicant

Date: _____

Witness: _____

If the applicant is under 18 year of age, a parent/legal guardian must also sign the waiver.

I give authorization for _____ to participate in the Fauquier
(Name of Minor)

County Sheriff's Office Ride-Along Program in concurrence with the above stated waiver of civil liability and indemnification agreement.

Signature of Parent/Legal Guardian and Relationship

Date: _____

Printed Name of Parent/Legal Guardian

Witness: _____

Section below is to be completed by the Fauquier County Sheriff's Office

Approved _____ Disapproved _____ Date: _____

Date of assigned Ride-Along _____

Patrol Division Commander: _____

Additional Conditions (if any): _____

cc: Administrative File