



SILVERTON POLICE DEPARTMENT PATROL OBSERVATION APPLICATION

No Blocked
Numbers

PHOTO ID REQUIRED (COPY WILL BE RETAINED) APPLICANTS MUST BE 16 YEARS OF AGE

(Please Print)

NAME: _____ DATE OF BIRTH: _____
LAST FIRST MIDDLE MONTH / DAY / YEAR

HOME PHONE: _____ WORK: _____ CELL: _____
(PLEASE DO NOT LIST A BLOCKED NUMBER AS WE WILL NOT BE ABLE TO CONTACT YOU.)

HOME ADDRESS: _____
NUMBER STREET CITY STATE ZIP CODE

DRIVER'S LICENSE # AND STATE: _____

ARE YOU A POLICE APPLICANT? YES NO ARE YOU A VOLUNTEER? YES NO

PURPOSE OF RIDE (PLEASE EXPLAIN): _____

IN CASE OF EMERGENCY, NOTIFY: _____
FIRST NAME LAST NAME PHONE

The duration of the patrol observation is up to the discretion of the officer, with a maximum duration of 5-hours. Please select a preferred date and time below. A department member will contact you to review your information and to schedule the date and time of your ride. Please schedule as far in advance as possible (72 hour minimum).

Your application is not approved until you are contacted by telephone.

DATE YOU WANT TO RIDE: _____ TIME: 6 AM 8 AM 1 PM 4 PM 8 PM 10 PM

The applicant named above hereby acknowledges and declares that this application is made with the following understandings and stipulations:

- The applicant will ride as a passenger in motor vehicles owned by the City of Silverton and operated by employees of the Silverton Police Department. Such transportation is furnished to the applicant purely gratuitously, as a revocable privilege, so that the applicant may observe the daily routine operation of the Silverton Police Department on patrol.
- Applicants will wear appropriate clothing (ie. business casual dress) as they are representing not only themselves but the department.
- Routine patrol duties may involve the operation of police vehicles in emergency conditions as authorized by O.R.S. 820.300. Such operation may involve greater than normal speeds, justified disregard of certain traffic control devices and rules of the road, etc. The circumstances requiring emergency operation may include, but are not limited to pursuit of other vehicles and expeditious transit to suspected crimes in progress. Such circumstances are so varied that an exhaustive list cannot reasonably be compiled. Determination of when to operate a police vehicle as an emergency vehicle is within the sole discretion of the Silverton Police Department and its officers.
- Police work involves, by its very nature, many hazards beyond the power of the police department and its officers to control. At all times while riding as a patrol observer, the applicant agrees, without question or hesitation, to abide by the directions of the Silverton Police Department given by its officers; and further recognizes that those directions may not effectively eliminate risk to the applicant, which risk the applicant assumes.
- The applicant recognizes that in an emergency, a police officer may not be able to both perform their duties and dismiss the applicant from their presence, thereby subjecting the applicant to the same risks as are presented to the officer. The applicant recognizes and acknowledges assumption of this risk.

- The applicant recognizes that criminal charges and /or civil suits arise from many of the situations that confront police officers in their daily work. The applicant agrees to keep confidential all observations and conversations which may emerge as a result of their participation in this program. **Please note: audio and video recordings and photographs are not allowed.** The applicant recognizes the possibility of being civilly liable for any disclosures of this confidentiality.
- The applicant recognizes that during the course of participating in patrol observation, the applicant will become a witness to traffic violations and criminal offenses. The officer will provide the applicant's name and address as a witness whenever applicable. The applicant acknowledges that as a witness, there is a potential of being subpoenaed to testify in court.
- The applicant recognizes that if they require medical assistance, including first aid and/or ambulance service, the Silverton Police Department will arrange for the same. The applicant hereby consents and agrees to pay any and all costs incurred or accruing in connection therewith.
- In consideration of the acceptance of this application and granting by the Silverton Police Department of the privilege of acting as a patrol observer, the applicant does hereby forever release, discharge, and acquit the City of Silverton, its officers, agents, and employees from any and all claims for death, personal injury and/or damage to property of any nature which may arise from or in connection with their participation hereunder.
- This patrol observation may be canceled or terminated at any time at the discretion of the on-duty shift commander.
- **The applicant understands that physical activities or hazards may include, but are not limited to: navigating varied surfaces and terrain; changing weather conditions; uneven and/or slippery ground; varying slopes and surface conditions; walking and potentially running; elevated stress levels. The applicant is physically fit and able to participate in such activities and agrees to be solely responsible for making this assessment or having a medical review prior to participating. Applicant represents that there are no health related issues that would restrict such activities.**

THE APPLICANT DECLARES TO HAVE CAREFULLY READ AND FULLY UNDERSTAND THE FOREGOING: and, by signature affixed hereto, accepts the same and assents thereto in its entirety.

APPLICANT: _____ DATE: _____

_____ DATE: _____

Parental Signature (if under 18)

SILVERTON POLICE DEPARTMENT USE ONLY

Date Applicant Will Ride: _____ Time: _____ Officer Requested: _____

RECORDS CHECK (ATTACH CONCEALED WEAPONS PERMIT AND CORRECTIONS CLIENT INFO):

CCH/WANTEDCHECK: _____

DL: _____

INITIALS: _____ CHARLIE#: _____

LEARMS: _____

COPLINK: _____

APPROVED BY SUPERVISOR:

BY: _____

DATE: _____

<p>Date of Ride: _____</p> <p>From _____ To _____ Hours</p> <p>Officer's Initials: _____</p> <p>Officer's DPSST #: _____</p>
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