

UAF POLICE RIDE-ALONG REQUEST FOR MINORS

First, middle, Last name:			
Address:			
Phone number:	Date	of Birth:	
Email address:			
		mber, relationship:	
Preferred Day(s) of week	:	Preferred times:	
Preferred Officer (if any):	F	Reason for Ride Along:	
Do you have any needs th	nat require consideration:		
Are you an employee of t	he University of Alaska?:		
IF UNDER 18 YEARS of AG	GE- Legal Guardian must co	omplete section below:	
Legal Guardian Full Name	e:		
Home Phone:	Cell Phone:	Work Phone:	
Date of Birth:			
Cuardian's Signature			

*** LEGAL NOTICE- PLEASE READ BEFORE SIGNING*** This form must be completed and returned to the UAF Police Department at least 72 hours before the date requested. Submittal of form does not mean the request has been approved. Back ground checks will be performed on all requesters prior to the approval to participate. You will be contacted by UAFPD to inform you of request status. During that contact, the date, time and officer assignment will be established if the request has been approved. Ride Along applicants will be given a safety briefing at the time of the ride along. Any questions concerning ride- alongs should be addressed to UAF Chief of Police at 474-7721. Riders are expected to be physically able to handle themselves in the event of an emergency or critical incident. Please clearly indicate any special needs or conditions that may impact this ability. A photo ID must be provided at the time of the ride along. UA is an AA/EO employer and educational institution and prohibits illegal discrimination against any individual: www.alaska.edu/nondiscrimination.



UAF POLICE RIDE-ALONG AGREEMENT

Please read and initial the following statements. Every person going on ride-alongs must sign the UAF Police Department Ride-Along Agreement and their guardian must also sign the University of Alaska Release Agreement.

Rider's initia	als/Guardian initials	
	The officer I have been assigned to ride with has you to ask questions that may clarify any requiremen	
	I have voluntarily requested to ride as a passenge operated by official Law Enforcement personnel v icer.	
	I understand that the activities of the officer I am involving possible risk of personal injury and dam	
ride-along.	I understand that I am to obey the commands of I will not take any action that will inhibit the actio jeopardize the safety of myself and/or the officer.	ons of the officer I am assigned to
ride is for th	I understand the equipment assigned to an office ne purpose of aiding the officer in performing officed djust any of the equipment in the vehicle or on the	cial duties only and I will not touch
immediate and could re	I understand that failure to abide by the above re termination of the ride-along, can prohibit me fro esult in injury, death, civil liability or, if I intention t in criminal charges against me.	om future ride-along consideration
I have read	and am fully informed on the conditions of the ric	de-along program.
**Ride Alor	ng's Signature:	Date:
Parent/Leg	ral Guardian Signature:	Date:

Parents or Guardians must also complete and sign the University of Alaska Release Agreement for minors in addition to the request form. This release form can be picked up at the front counter of the UAF Police Department at 1788 Yukon Drive.

Please do not use the adult release form as it will not be accepted for anyone under 18 years of age. All forms must be turned in to the UAF Police Department prior to scheduling any ride-alongs.