



## Citizen Ride-Along Application

Complete form and return to:

Evans Police Department  
1100 37<sup>th</sup> Street  
Evans, CO 80620

**Date of application:** \_\_\_\_\_

Note: This request should be submitted to the Evans Police Department at least 10 days prior to the day you wish to ride. You will be contacted after the request is processed.

**Please PRINT the following:**

**FULL NAME:**

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First	Middle	Last
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**ADDRESS:**

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Number and Street	City and State	Zip
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**DATE OF BIRTH:** \_\_\_\_\_ **GENDER:** \_\_\_\_\_ **AGE:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_ **WORK PHONE:** \_\_\_\_\_

**DRIVER'S LICENSE # (or other ID):** \_\_\_\_\_ / State \_\_\_\_\_

**OCCUPATION / EMPLOYER:** \_\_\_\_\_

**DATE YOU WISH TO RIDE:** \_\_\_\_\_

**FROM:** \_\_\_\_\_ a.m. / p.m. **TO:** \_\_\_\_\_ a.m. / p.m.

**REASON FOR RIDE ALONG:**

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**PARENT OR GUARDIAN'S CONSENT**

I / We, the undersigned, represent that I/we are legally appointed or natural guardian(s) of the above named person who is under the age of eighteen years; that he/she has signed the within and foregoing document with our full knowledge and consent; and the I/we join in the execution of the same and agree to the terms thereof and do hereby find myself/ourselves in independent agreement to the same terms and provisions for myself/ourselves and my/our heirs, executors, personal representatives, and assigns.

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Printed Name	Relationship
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Signature	Date
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**For Official Use Only**

**Approved** \_\_\_\_\_ **Denied** \_\_\_\_\_

\_\_\_\_\_  
**Command Officer's Signature** **Date**

\_\_\_\_\_  
**Date/Time Completed Ride Along**

\_\_\_\_\_  
**Officer's Signature** **Date**

**Criminal History Attached: Yes** **No**

**Applicant Notified:** \_\_\_\_\_  
**Date**