Officer Ride Along Approval Form

Applicant Information:

Name: ____________________________________________
Address: __________________________________________
Phone Number: _____________________________________
Reason for Ride: ____________________________________

Endorsing Officers Information

Sponsoring Member:

Name: ____________________________________________
Assignment: _______________________________________
Shift: _____________________________________________
Signature: _________________________________________

**Endorsing Officer:

Name: ____________________________________________
Assignment: _______________________________________
Shift: _____________________________________________
Signature: _________________________________________

Available dates that the rider may ride: _______ _______ _______
(Operations Division may choose one of these dates)

Individuals requesting a Ride Along shall be over 18 years of age and must call 720-913-3438 to schedule an appointment, weekdays between the hours of 0730 and 1500, with the Operations Division. Please bring a completed copy of this form along with a valid picture ID to your appointment; (745 West Colfax, 2nd floor).

** Note: The Endorsing Officer should be on the same company and shift as the rider.