

CITY OF ROSEVILLE POLICE DEPARTMENT SIT-ALONG APPLICATION

Persons wishing to complete a sit-along with a City of Roseville ("City") Police Department dispatcher must complete this application at least seven (7) days in advance of the day they wish to sit. Each request will be reviewed and processed by a dispatch representative. You will be advised of your application's approval or denial by phone. Applicants for sit-along must be at least 15 years of age. Juveniles require signed permission of their legal guardian. This application expires three months after date of approval.

Full Name Of Applicant	Last	First	Middle	Date of Birth:
Driver's License Number & State:				Social Security Number:
Home Address:				Telephone Number:
Purpose of Sit-Along?				Have you ever been convicted or pled guilty to a crime? Y or N
Signature or Parent/guardian				

**I, the above signed, declare under the penalty of perjury that I have given the correct information in the forgoing application, and that I have read and understand the agreement herein assuming risk of injury or damage, waiver and release of claims: and that I knowingly and willingly assume the risk of any loss, damage or injury of any kind whatsoever, which I, or my child, my property, or my child's property, may incur as a result of participating in the Roseville Police Department Sit-Along Program.

Sit-Along Regulations	Initial Below
<i>Please review the "Sit-Along Regulations" and initial in each of the boxes to the right.</i>	
1. Sit-Along applicants understand and accept that the Roseville Police Department will conduct an automated check of their DMV status and Criminal Offender Records Information (RAP Sheet) for data related to prior arrests and convictions.	
2. Appropriate business casual attire is required. T-shirts, tank tops, shorts, and hats are not acceptable. The City Police Department dispatch sit-along employee may refuse a sit-along to persons not properly attired.	
3. Sit-along participants shall not become involved in any City Communications Center operations. The observer will not be allowed to answer the phone, talk on the radio or utilize any City computer system.	
4. Sit-along participants must follow the instructions of the City Police Department dispatcher at all times. Any failure to follow instructions will result in termination of the sit-along.	
5. During your sit-along, you may be exposed to information on persons who contact or are contacted by, or under investigation of, the police. You are prohibited by law from divulging, releasing, providing, or granting access to any information received during the City Police Department Sit-Along to anyone.	
6. You may terminate the sit-along at any time.	
7. I understand and have read the attached Sit-Along Regulations and herein agree to follow and abide by the terms stated therein.	

CITY OF ROSEVILLE POLICE DEPARTMENT SIT-ALONG WAIVER

Please read this entire waiver before signing.

The undersigned has requested permission to sit-along as a guest/observer in a City of Roseville Police Department activity. The undersigned will accompany a City of Roseville dispatcher during the course of their duties which may involve hearing or perceiving difficult and traumatic events including injury, death or other life-threatening, high stress situations.

The undersigned hereby releases the City of Roseville, its officers, agents, employees, and volunteers from, and waives and relinquishes any claim, liability, cause of action, damages, or costs for, personal injury or property damage arising as a result of, participation in or receiving instructions from the City of Roseville regarding said activity. The undersigned acknowledges that he she has been fully advised of the risks and potential dangers incidental to engaging in the activity for which this form is submitted, and voluntarily and knowingly assumes the risks of engaging in the activity.

Note: By signing this agreement, you are agreeing to relieve the City of Roseville of liability for personal injury, wrongful death, or property damage.

Applicant Full Name

Applicant Signature

Date

Parent or Guardian Signature (if applicable)

Date

DO NOT WRITE BELOW THIS LINE

Date Completed	Roseville Police Department Staff Action	Staff Signature
	Application received by Records via mail <input type="checkbox"/> at counter <input type="checkbox"/> via fax <input type="checkbox"/> via email <input type="checkbox"/>	
	<p style="text-align: center;">Records Check</p> CORI <input type="checkbox"/> DMV <input type="checkbox"/> NCIC <input type="checkbox"/> LOCALS <input type="checkbox"/> SOCIAL MEDIA <input type="checkbox"/>	
	Application review by RPD Employee Representative Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Reason:	
	Applicant contacted with application results	
	Sit-Along scheduled Date & Time:	
	Application submitted to records after completion of sit-along.	
	In-house name entry. Application kept on file in records for two (2) years.	
	Does dispatcher recommend future sit-alongs for this applicant? Yes <input type="checkbox"/> No <input type="checkbox"/> Reason:	