



CHARLESTON POLICE DEPARTMENT

Chito T. Walker
Chief of Police

180 Lockwood Blvd. • Charleston, South Carolina 29403

Charleston Police Department Ride-Along Program

The Ride-Along program provides the opportunity to observe police patrol duties at the Charleston Police Department. This program is offered to eligible students and those interested in employment at this agency. In order to minimize the possibility of interference with patrol duties and safeguard observers, strict adherence to the following instructions is necessary:

1. Prospective observers must be at least 18 years of age with proper identification at the time of application. The prospective observer must sign a waiver of liability and submit a copy of their driver's license. No one under the age of 17 is authorized to participate in the Ride-Along program.
2. All Ride-Along observer applications will be reviewed and approved by the Community Oriented Policing Division Commander or their designee before any ride is scheduled.
3. All Ride-Along observer assignments will be determined by the Community Oriented Policing Division Commander or their designee.
4. Observers shall arrive at Headquarters (180 Lockwood Blvd.) 15-minutes prior to their scheduled Ride-Along time with proper identification readily available to provide to the desk sergeant.
5. Observers are under the direction of the officer at all times.
6. Observers shall not exit the police vehicle at any scene without first obtaining permission from the officer.



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7. Observers shall not participate in any police activity or converse with prisoners, suspects, victims, and/or witnesses unless directly requested to by the officer.
8. Observers shall not interfere with the officer's activities at any time. Questions and inquiries are encouraged but must be asked at the appropriate time.
9. All observers will dress professionally. Observers will wear dress pants with closed-toe shoes and a dress shirt or a polo. The desk sergeant, the officer, and the officer's supervisor have the authority to refuse a Ride-Along to any observer determined not to be appropriately dressed. **No blue jeans, sneakers or athletic shoes, tank tops, t-shirts, or police-related clothing will be allowed.**

I have read and understand the above instructions and guidelines.

Signature or Parent/Guardian if under 18

Print Name of person signing document

Date



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Ride-Along Information Agreement and Release for Adults

NAME: _____
Last First Middle

ADDRESS: _____
Number Street Apt. #

City State Zip Code Phone #

DOB: ____/____/____ SSN: ____-____-____ Race/Sex: ____/____

Driver's License #/State: _____ E-Mail: _____

Why do you want to do a Ride-Along?

I hereby confirm that I have carefully read and understand the contents of this document and sign the same on my own free will. I also declare that I have read, received a copy of, and will abide by the instructions for Ride-Along observers. I also attest that the information I have provided is true and accurate.

Signature: _____ Date: _____

FOR POLICE DEPARTMENT USE ONLY

A record check of the Ride-Along observer listed above was completed by:

Name: _____ Signature: _____ Date: _____

Local: None Found Copy Attached NCIC: None Found Copy Attached

Approved by: _____