

New Hanover County Sheriff's Office  
Ride Along Request Form

Date of Application: \_\_\_\_\_ DOB: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Name:**

(Last) \_\_\_\_\_ (First) \_\_\_\_\_ (M.I.) \_\_\_\_\_

**Address:**

\_\_\_\_\_

School or Employer: \_\_\_\_\_ SSN: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State \_\_\_\_\_

**Emergency Contact Information:**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Relationship \_\_\_\_\_

I \_\_\_\_\_ am requesting to be approved to Ride-Along with the New Hanover County Sheriff's Office as indicated above. I understand I must be 18 years of age or have permission from a teacher and guardian for a Senior Project. I realize that the career of a Law Enforcement Officer is often dangerous and unpredictable. Fully understanding this, I unconditionally release the New Hanover County Sheriff, Edward J. McMahon, his Deputies and/or agents; and the government of New Hanover County from any and all liabilities associated with my subsequent approval and participation as a Ride-Along with the New Hanover County Sheriff's Office.

I understand that I am not authorized to carry or possess firearms, weapons (including a pocket-knife) or drugs during the duration of the approved Ride-Along. I understand that I must remain in the county vehicle at all times unless directed by the Deputy or other member of the NHSO. I will not tamper with or handle any equipment in the county vehicle.

I understand that I must continue to obey all laws and follow the lawful instructions and directives issued by the approved Ride-Along Deputy or other members of the New Hanover County Sheriff's Office.

**Attire is as follows:** Business Casual (**NO jeans**), no flip flops, open toed shoes or high heels.

**Applicant's Signature** \_\_\_\_\_

**Are you any of the following:**

- Intern  If so, which division \_\_\_\_\_ Signature of supervisor \_\_\_\_\_
- Applicant with the agency  Signature of recruitment personnel \_\_\_\_\_
- Citizen's Academy  Signature of CAP Unit personnel \_\_\_\_\_
- VIPR  Signature of CAP Unit personnel \_\_\_\_\_
- BLET sponsored by NHSO  Signature of recruitment personnel \_\_\_\_\_
- 911 Center Employee  Signature of appropriate personnel \_\_\_\_\_

**Deputy for Ride-Along:** \_\_\_\_\_

**Relationship to Deputy:** Friend: \_\_\_\_\_ Family Member: \_\_\_\_\_ Other: \_\_\_\_\_

**Reason for Ride-Along:** \_\_\_\_\_

**Date of Ride-Along:** \_\_\_\_\_ **Shift Preference:** Day \_\_\_\_\_ Night \_\_\_\_\_

**Approved:** \_\_\_\_\_ **Disapproved:** \_\_\_\_\_

**Lieutenant Patrol Division ADC**

**Approved:** \_\_\_\_\_ **Disapproved:** \_\_\_\_\_

**Captain Patrol Division**

Deputy's Checklist

- Attendance \_\_\_\_\_
- Attire \_\_\_\_\_
- Picture ID \_\_\_\_\_
- Medical Problems \_\_\_\_\_
- Ride-Along Participants Signature: \_\_\_\_\_
- Drugs/Weapons/Firearms \_\_\_\_\_
- Cameras or Recording Device \_\_\_\_\_
- Remain in Vehicle \_\_\_\_\_
- Vehicle Equipment \_\_\_\_\_
- Deputy's Signature: \_\_\_\_\_

What was most informative about the ride-along? \_\_\_\_\_  
\_\_\_\_\_

What did you like the least about the ride-along? \_\_\_\_\_  
\_\_\_\_\_

Other comments, impressions or suggestions? \_\_\_\_\_  
\_\_\_\_\_