



West Metro Fire Protection District
433 South Allison Parkway, Lakewood, CO 80226
(303) 989-4307
www.westmetrofire.org

RIDE-ALONG/OBSERVER APPLICATION

NOTE: Minimum of 2 weeks advance notice required.

Mail or drop off completed application, forms and \$10 applications fees to:
West Metro Fire Rescue/ride along, 433 S. Allison Pkwy, Lakewood, CO 80226

I, _____ submit this application to participate as an observer in
(print name of applicant)
West Metro Fire Protection District's (WMFPD) Ride Along Program.

***For the purpose of:** _____

***I am requesting permission to ride-along/observe on this date:** _____ **at Station #** _____
(Requested date)

During the hours of (check one – 8 hours is the maximum time allowed): A ride along cannot be scheduled before 10 am.

- ☐ 10:00 am – 6:00 pm
☐ 11:00 am – 7:00 pm
☐ 12:00 pm – 8:00 pm
☐ Request another time between 10:00 am – 10:00 pm (8 hours maximum) _____

It is my responsibility to amend this statement if my length of ride-along or intended purpose should change.

Please check all that apply: (Mandatory)

- ☐ I have read and understand the District's policy on workplace violence.
☐ I have read and understand the Ride Along Guidelines.
☐ I have read, signed, and understand the Covenant Not to Sue/Promise to Release.
☐ I agree to follow all directions given to me by WMFPD personnel and supervisors, and I understand my ride-along may be terminated unilaterally by WMFPD at any time.
☐ I have attached any necessary paperwork required for an educational ride-along. (If applicable)

***Signature:** _____ ***Date:** _____
(Applicant)

***Address:** _____ ***City/St/Zip:** _____

***Email:** _____ ***Affiliation:** _____
(Business/School Affiliation or WMFPD Affiliation)

***Phone Number:** _____

***Emergency contact:** _____ ***Telephone:** _____

APPROVAL – This section to be completed by West Metro Fire Rescue Staff

Ride-Along Date: _____ Station/Rig _____ Officer Assigned: _____ Approved by _____

Paid _____

B/G Processed _____



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Please complete the following information for the required background check.

All information will be kept strictly confidential.

First Name: _____ **M.I.** _____ **Last Name:** _____

Preferred Name/Alias (optional): _____

Mailing Address: _____

City: _____ **Zip:** _____

Cell Phone #: _____ **Other phone #:** _____

Date of Birth: _____

Place of Birth: _____

Social Security # _____

In consideration of my application for the Ride-Along Program, I give West Metro Fire Rescue permission to check my personal background and to conduct other background checks such as arrest records, convictions, and traffic citations as necessary.

The above information is correct to the best of my knowledge.

Printed Name of Applicant: _____

Signature of Applicant: _____

Date: _____



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WEST METRO FIRE PROTECTION DISTRICT RIDE-ALONG GUIDELINES

1. Observers must arrive at the designated station or location 15 minutes prior to the scheduled time the ride-along is to begin. If you are unable to make the scheduled time, you shall call West Metro Fire Rescue (WMFR), (303) 989-4307 ext. 0, in advance to notify your estimated arrival time or cancellation.
If you are cancelling after hours or on a weekend, please contact Jeffcom Dispatch at 303-980-7300 and respond to the confirmation email requesting the cancellation. Two days-notice of cancellation is suggested.
Observers who do not show up for their scheduled time and do not contact West Metro Fire Rescue or Dispatch will not be permitted to reschedule a ride-along.
2. Every attempt will be made to keep you at the station where you were scheduled; however, operational changes may require you be reassigned for the day.
3. Dress appropriately for the fire service work environment. This will mean dark trousers, leather boots/dark-colored shoes, and short/long-sleeve shirts. All clothing should be clean and proper personal hygiene maintained. Observers shall wear clothing that does not contain offensive language, logos, graphics or pictures. You will be required to wear an Observer Safety Vest and/or identification during the ride-along period. Observers shall avoid wearing jewelry (wedding rings and watches are okay) during the ride-along.
4. Complete all paperwork in advance (Ride Along Application, Covenant Not to Sue/Promise to Release) and bring these forms with you on the day of the ride-along. You must turn in this paperwork to Administration Offices before you'll be allowed on the apparatus.
5. Be prepared. Bring all equipment you expect to use that day, including pens/pencils, lists of questions, paper, weather-appropriate clothing, educational materials, etc.
6. Report to the Company Officer/firefighter, introduce yourself, and describe the level of your fire and EMS training, if any. Let the officer know if you have specific needs or areas where you would like to observe.
7. You are a guest at the station. If you would like to eat with the on-duty crew, please inform the Company Officer. Crews share expenses for lunch and dinner. Please bring your meals or money (about \$10) to purchase food or buy into the station meals. You will be expected to clean up after yourself.
8. Observers shall abide by all rules and regulations of the District.
9. Observers will not be permitted to perform any acts other than observation. Exceptions for advanced-degree program participants will be arranged by the Training Division.



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WEST METRO FIRE PROTECTION DISTRICT RIDE-ALONG GUIDELINES (cont.)

10. Observers will be required to stay in the common/public areas of the fire station and shall not be allowed into private crew quarters.
11. Observers will not be permitted to take pictures or to make video or audiotapes.
12. Company officers may ask observers to leave the station at any time for good reason.
13. While responding to routine or emergency runs, the company officer has the discretion to ask the observer to remain in the District apparatus until the situation can be assessed and/or the safety of the observer can be ensured. Observers are expected to follow the command of the company officer. When the company officers are in command of a multi-apparatus response, the observer should report to incident command and may become the responsibility of the on-scene PIO until such time the company officer can resume the observer ride-along responsibilities.
14. Observers are reminded that, in the eyes of the public, they are with and therefore a part of WMFR, and are to conduct themselves at all times in a manner that will not bring discredit to the District. Observers will be briefed on issues of medical confidentiality by the company officer and will be expected to respect the privacy of all parties and their families.
15. At no time are observers allowed to enter a private residence. You will be asked to remain on the fire apparatus.
16. Observers will be required to sign a Covenant Not to Sue/Promise to Release form, read a copy of the Workplace Violence Policy, and complete the Ride-Along/Observer Application prior to being allowed to participate.

By signing this document, you agree to the West Metro Fire Rescue's Guidelines for Observers.

Printed name of Applicant

Signature of Ride-Along Applicant

Date



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WEST METRO FIRE PROTECTION DISTRICT RIDE-ALONG PROGRAM

COVENANT NOT TO SUE, PROMISE TO RELEASE, INFORMATION RELEASE UNDERSTANDING

IN CONSIDERATION of permission which I have received to accompany firefighters of the WEST METRO FIRE PROTECTION DISTRICT of Lakewood, Colorado, in the course of his/her or their duty, I, the undersigned do by present release of the WEST METRO FIRE PROTECTION DISTRICT, its officer, firefighters and employees from any and all liability, claims, demands, actions and causes of action which I may hereafter have on account of any and all injuries and damage to me or my property, or my death, arising out of or related to any happening or occurrence while I am accompanying any officer or firefighter of the WEST METRO FIRE PROTECTION DISTRICT on duty or incident thereto, and for the same consideration, I promise to release, and covenant not to sue the said Fire Protection District and the said persons, and agree to forever hold them and each of them harmless from any such liability, claims, demands, actions or causes of action.

The terms hereof shall be of full force and effect on the date hereof and on any other occasion when I may hereafter accompany any WEST METRO FIRE PROTECTION DISTRICT officer or firefighter.

I have read and understand the conditions of this program as stated above and hereby voluntarily assume all risk of loss, damage to me or to my property, including death, which may be sustained while or incidental to accompanying one or more WEST METRO FIRE PROTECTION DISTRICT members while on duty.

This release and agreement shall be binding upon me, any of my heirs, executors, administrators, personal representatives and assigns, and shall inure to the benefit of the said Fire Protection District, officers, and members herein designated, and their heirs, executors, administrators, personal representatives, assigns and successors in office.

Dated this _____ day of _____, 20_____

Signature

Printed Name



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**WEST METRO FIRE PROTECTION DISTRICT
RIDE-ALONG PROGRAM
WORKPLACE VIOLENCE/PROFESSIONAL CONDUCT**

To: All Citizens and Ride-Along Applicants:

The West Metro Fire Protection District is committed to a safe, healthy, productive workplace for all its employees, citizens and guests. Our policy is to maintain a work environment that is free from intimidation, harassment, threats and hostile or violent acts of any kind. West Metro will not tolerate threatening, intimidating or hostile behavior; verbal or physical abuse; weapons and ammunition possession or use (excluding Fire Investigators) on company property or performing company business; vandalism; arson; or any other act against a person which is detrimental to the safety and welfare of others or their property. Violation of this notice may result in dismissal from the Ride-Along Program, at the officer's discretion.

Printed Name of Applicant

Signature of Applicant

Date