



ARIZONA DEPARTMENT OF PUBLIC SAFETY
APPLICATION AND LIABILITY WAIVER
CIVILIAN OBSERVER PROGRAM

INSTRUCTIONS

BEFORE COMPLETING THE APPLICATION, PLEASE READ THE PROGRAM RULES AND GUIDELINES ON THE REVERSE

This Application and Liability Waiver is to be completed and signed by the applicant; minors must obtain parental approval. The signed application and waiver is to be forwarded to the DPS office in the area where the observation will take place. After completion of a criminal / records check, the application will be reviewed by the Area Supervisor and forwarded to the District Commander for approval. Approval by the respective District Commander must be obtained before participation may begin. The Area supervisor will contact the applicant after completion of internal processing.

APPLICANT

RESIDENCE STREET ADDRESS CITY STATE ZIP CODE

IDENTIFICATION (No., License, Class, State, Exp.)

SOCIAL SECURITY NO.

YES NO

- ☐ ☐ Have you ever been convicted of a felony or are charges pending?
- ☐ ☐ Do you have any disabilities? Specify: _____
- ☐ ☐ Are you an Explorer Scout? Post No.: _____
- ☐ ☐ Are you a Certified Peace Officer? Agency: _____
- ☐ ☐ Are presently using any drugs and/or have you ever been arrested on any drug or narcotic related charges?
- ☐ ☐ Is applicant an off duty employee or Reserve Officer?

I.D. NO.	TITLE	LOCATION CODE	SUPERVISOR'S APPROVAL	DATE
			X	

PURPOSE

BRIEFLY EXPLAIN WHY YOU WISH TO PARTICIPATE IN THE OBSERVER PROGRAM:

TOUR

I request to ride with an officer during the following tour of duty:

DATE	BEGINNING TIME	ENDING TIME	DISTRICT	AREA	OFFICER

LIABILITY WAIVER

As a participant in the Arizona Department of Public Safety's Observer Program, I agree to abide by all program rules and guidelines and to the following:

1. To release and hold harmless the State of Arizona, its employees and agents, from any and all liability for any damage to personal property or injury sustained while accompanying a DPS officer in the line of duty, regardless of the cause of such damage or injury, whether through negligence or otherwise.
2. That this release of liability shall apply to any right of action that might accrue to myself, my parents or guardians, my heirs or any other personal representative.
3. To assume all risks when accompanying a DPS officer while on-duty and/or while riding in a state-owned vehicle, knowing of a personal danger involved.
4. This waiver and release of liability shall be in effect for a period of ninety (90) days commencing with the date of execution and subsequent District Commander's approval.

LIABILITY WAIVER

I have read the program rules and guidelines on the reverse side of this form and the above liability waiver. I understand and agree to abide by them.

X

APPLICANT'S SIGNATURE

DATE

X

As parent / guardian of the applicant under 18 years of age, I grant permission for his / her participation.

DATE

X

WITNESSING DPS EMPLOYEE OR NOTARY PUBLIC

DATE

NOTARY, My commission expires:

APPLICANT'S FULL NAME: (Last, First, Middle)

DATE OF BIRTH

HOME TELEPHONE NO.:

WORK TELEPHONE NO.:

OBSERVER PROGRAM RULES AND GUIDELINES

1. Written parental approval is required for unmarried persons under 18 years. Parental endorsement must be notarized or witnessed by a DPS employee.
2. Persons under 16 years of age may not participate except for members of an organization recognized by the Department.
3. Participation may not be approved if: applicant, over 18 years, does not have proper identification; applicant's driver's license is suspended or revoked; a warrant for applicant's arrest has been issued; or applicant has been convicted of a felony.
4. Observer dress must be in good taste and consistent with department standards. Female observers must wear pants / slacks. Dresses, skirts and shorts are not permitted.
5. Firearms or other weapons shall not be carried by a civilian observer. Certified law enforcement officers from other agencies must have the approval of the District Commander before carrying a weapon while riding with a DPS officer.
6. The observation ride may be terminated by the officer at the time due to hazardous conditions or observer misconduct. The observer may request to terminate the ride at any time and the officer will honor the request as soon as it is practical to do so.
7. For personal safety, the observer must follow the directions of the officer, particularly in the event of unusual or hazardous conditions.

RECORD OF PARTICIPATION

Before each observation ride, the applicant must sign this record of participation to reaffirm acknowledgment and understanding of the program rules, guidelines and Liability Waiver. The respective Area Supervisor or designate must approve before any civilian may ride.

DATE	OBSERVER'S SIGNATURE	AREA SUPERVISOR / DESIGNATE	OFFICER'S BADGE NO.	OFFICER'S INITIAL
	X			
	X			
	X			
	X			
	X			

DPS USE ONLY

BACKGROUND

The DPS Area Supervisor will check the following to determine if the applicant meets the criteria for participation:

- ☐ Application completed and signed ☐ If under 18 years, parental permission signed and witnessed
☐ Identification valid ☐ No suspensions / revocations ☐ No outstanding warrants ☐ No felony convictions

REMARKS

APPROVALS

X _____
AREA SUPERVISOR BADGE NO. LOCATION CODE DATE

☐ Approve
☐ Disapprove X _____
DISTRICT COMMANDER BADGE NO. DATE

ADDITIONAL REMARKS