



Ambassador Academy

Key West Ambassador's Academy is an interactive, 13-week program that focuses on educating citizens about the City's government processes. Elected officials, department directors and other city staff will host unique and informative sessions each Thursday afternoon from 1-4. The sessions are designed to give citizens hands-on experience in City government operations. This is your chance to learn the ins and outs of City management and meet the people who work for you.

**City of Key West Ambassadors Academy
Class 32 Application
July 11 2019 – October 3, 2019**

Name:

Address

City

State

Zip Code

Phone number you want to share with classmates:

Email address to share with class:

I am a resident of the City of Key West:

I am a business owner in the City of Key West: Yes No

Business name :

Please tell us why you would like to become an Ambassador:

On the back of this form or another sheet of paper, please write a **brief** bio which includes the following:

- Length of time in Key West and where you are from
- Your skills or profession
- Education
- Volunteer efforts

Please note that some of this information will be used in a roster and shared with your fellow classmates.

Reference:

(Name)

(Phone)

Reference:

(Name)

(Phone)

Local organizations/boards in which you are a member/volunteer:

Shirt Size:

Male

Female

S

M

L

XL

2XL

(polo style)

Please send or email your completed application to:

Alyson Crean, Public Information Officer
City of Key West
1604 N. Roosevelt Boulevard
Key West, FL 33040
Phone: 305-809-1058
Email: acrean@cityofkeywest-fl.gov

Class size is limited. Notifications of acceptance into Class 32 will be sent out by June 27th.

You are required, during your 13-week session, to participate in a ride-along with the Key West Police Department. Please fill out the following form and submit it with you application.

Do not fill in the dates, however. **We will provide instructions about the ride-alongs in the first class session.**

Please note: Florida has a very broad public records law. Most written communications to or from the City regarding City business are public record, available to the public and media upon request. Your communications may be subject to public disclosure.

Sean Brandenburg

Chief of Police



Key West

POLICE DEPARTMENT

Ride Along Program Request Form

General Order 06.02, Ride Along Program, Form 001

Any person who would like to accompany a Key West Police Officer on patrol must complete this form and submit it to the Division Commander. A request form must be prepared each time the applicant wishes to ride. To be eligible, the applicant must:

- ✓ Be at least 18 years of age, (or otherwise approved by the Division Commander and applicant's parent or guardian).
- ✓ Be willing to sign a waiver of liability.
- ✓ Must agree to comply with all written and verbal instructions to him or her as they relate to the Ride Along Program.
- ✓ Not have ridden more than once in the past 30 days, (unless otherwise approved by the Division Commander).
- ✓ Be willing to submit to a warrant check and a criminal history check, which will be reviewed by the Division Commander for eligibility to ride with an officer.
- ✓ Not have been suspended from the program.

PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Name: _____

Race: _____ Sex: _____ DOB: _____ Hair: _____ Eyes: _____

Social Security: _____ Pursuant to Florida Statute 119.071, your social security number has been requested for identification and background check purposes only. The information will not be used for any other purpose.

Address: _____ Phone: _____

Reason for your "Ride Along" request: _____

REQUESTED DATES

First Choice : _____ Date: _____ Times: _____
Second Choice: _____ Date: _____ Times: _____

With my signature below, I indicate that I understand all information that I provided herein is subject to verification, and that a warrant check and criminal history check may be conducted to determine if I am eligible for this program.

Applicant's Signature _____ Date _____ Witness Signature _____ Date _____

<input type="checkbox"/> Approved	To Ride Date/Time:	Division Commander's Signature
<input type="checkbox"/> Disapproved	Reason:	
<input type="checkbox"/> Suspended	Reason:	
Notes:		Date

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AGREEMENT OF CONDITIONS,
AGREEMENT ASSUMING RISK OF INJURY OF DAMAGE,
WAIVER AND RELEASE OF CLAIMS AND INDEMNITY AGREEMENT

WHEREAS, I, _____ being / not being over the age of eighteen (18) and not being a member of the Key West Police Department, have made a voluntary request to ride as a guest in a vehicle of the Key West Police Department, and to accompany a member or members of the Police Department during the performance of their official duties; and

WHEREAS, the Key West Police Department is willing to allow me to ride as a guest in a patrol vehicle, and to accompany a member or members of said Department during the performance of their official duties, I do hereby agree:

1. That I am aware that the work of the Police Department is inherently dangerous, and that I may be subjected to the risk of death, personal injury, exposure to biological hazards, or damage to my property during the performance of their official duties; and that I freely, voluntarily, and with such knowledge assume the risk of death, personal injury, exposure to biological hazards, or property damage arising from or in any way connected with the use of weapons, unlawful acts or forcible resistance by law violators, assault, riot, breach of the peace, fire, explosion, gas, electrocution, or the escape of radioactive substances while accompanying a member or members of the Police Department during the performance of their official duties.
2. That the Chief of Police of the City of Key West, officials, Officers, agents, servants and Employees of the City of Key West, all Members of the Key West Police Department, their sureties and each of them shall not be responsible or liable for any injury, exposure to biological hazards, damage, loss or exposure, either to me or my property, incurred while riding in any vehicle of the Key West Police Department or while accompanying any member or members of said Department during the performance of their official duties.
3. For myself, my heirs, executors, administrators and assigns to defend and indemnify the City of Key West, Chief of Police, all Members of the Key West Police Department, their sureties and each of them, against any and all manner of actions, causes of actions, suits, debts, claims, demands, damages, liability or expense of every kind, and nature incurred or arising by reason of any actual or claimed negligent or wrongful act or omission of mine, while riding in any vehicle of the Key West Police Department, or while accompanying any member or members of said Police Department during the performance of their official duties.
4. I hereby agree to obey at all times, all instructions, orders and commands given by the officer or officers in command of any vehicle in which I may be riding or with whom I am accompanying. I further agree to keep confidential anything which I may observe when requested to do so by members of the Key West Police Department.
5. I understand that my privilege to be a guest may be terminated at any time by any member of the Key West Police Department.
6. That in consideration for this opportunity, I hereby remise, release, acquit, satisfy, and forever discharge, and by these presents do, for my heirs, executors, and administrator, remise, release, satisfy and forever discharge the City of Key West, officials, Officers, agents, servants and Employees of the City of Key West, Chief of Police, his or her Officers, and Members of his or her Department, their heirs executors and administrators, of and from all manner of actions, cause and causes of actions, suits, debts, dues, sums of money, accounts, reckoning, bonds, bills, specialties, covenants, contracts, controversies, agreements, promises, variances, trespasses, damages, judgments, executions, claims and demands whatsoever, in law or in equity, against the City of Key West, Officials and Employees of the City Key West, Chief of Police, his

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Key West Police Department 1604 N. Roosevelt Blvd. Key West, FL 33040 (305) 809-1111
www.keywestcity.com



Officers, agents, servants and members of his or her Department I ever had, now have or which my heirs, executors or administrators, hereafter can, shall or may have, for, upon or by reason of any matter, cause or thing whatsoever, from the beginning of the world to the day of these presents, especially as to any action pertaining to riding as an observer or accompanying a member of the Key West Police Department.

7. I agree to comply fully with all of the below Departmental regulations:

06.02.04 RIDER / OBSERVER

06.02.04.01 Dress Code and Grooming

Riders will dress appropriately. Appropriate attire at a minimum would be considered denim jeans in good condition or dress slacks, casual or dress shirt and closed toed shoes. No items depicting the KWPD logo will be worn at any time. Shorts, T-shirts, sleeveless shirts, flip flops, sandals and large earrings are not acceptable. Hair and any beards or mustaches will be well groomed.

06.02.04.02 Conduct

Riders must realize that while participating in the Ride Along Program, their conduct and actions may reflect on the Key West Police Department. For this reason, all riders shall conduct themselves in a courteous and professional manner.

- A. Any conduct or actions of the rider which are deemed inappropriate by the officer or supervisor will be grounds for immediate termination of their riding privilege.
- B. No rider will have physical contact with any citizen or suspect/arrestee unless so directed by the officer.

06.02.04.03 Assisting Officer

No rider will take any action in any way unless so directed by the officer unless the officer is in imminent danger and in need of immediate assistance from the rider. All riders will remain inside the police vehicle at all incidents, unless otherwise allowed by the officer under extreme emergency conditions.

06.02.04.04 Compliance with Instructions

All riders will comply fully with all instructions given by any officer or supervisor of this Department.

_____	_____	_____	_____
Applicant's Signature	Date	Witness' Signature	Date
_____	_____		
Parent's Signature (For applicants under the age of 18)	Date		



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