

OFFICE OF THE CHIEF OF POLICE

ADMINISTRATIVE ORDER NO. 1

January 7, 2015

SUBJECT: COMMUNICATIONS DIVISION SIT-ALONG APPLICATION,
FORM 15.83.01 - ACTIVATED

PURPOSE: The purpose of this Order is to activate the
Communications Division Sit-Along Application,
Form 15.83.01.

PROCEDURE: COMMUNICATIONS DIVISION SIT-ALONG APPLICATION,
FORM 15.83.01 - ACTIVATED. The Communications
Division Sit-Along Application, Form 15.83.01, has been activated
and will be used to document all approvals/denials of
Communications Division sit-along requests and to obtain waivers
of liability. The Commanding Officer, Communications Division,
or his/her designee must ensure that the Communications Division
Sit-Along Application is completed by each person requesting a
Communications Division sit-along at the Communications Dispatch
Centers.

- A. **Use of Form.** This form is used to approve or deny
dispatch sit-along requests and obtain waivers of
liability.
- B. **Completion.** A separate form must be completed for each
person requesting a Communications Division sit-along.
- C. **Distribution.**
 - 1 - Original, Commanding Officer, Communications
Division, and attached to and retained with the
Watch Commander's Daily Report, Form 15.80.00.
 - 1 - Copy (if requested), individual requesting a
Communications Division sit-along.

2 - TOTAL

FORM AVAILABILITY: The Communications Division Sit-Along
Application is available in E-Forms on the Department's Local
Area Network. A copy of this form is attached for immediate use
and duplication.

AMENDMENT: This Order activates the Communications Division
Sit-Along Application, Form 15.83.01.

January 7, 2015

AUDIT RESPONSIBILITY: The Commanding Officer, Communications Division, will monitor compliance with this directive in accordance with Department Manual Section 0/080.30.

A handwritten signature in blue ink, appearing to read 'C. Beck', is positioned above the typed name.

CHARLIE BECK
Chief of Police

Attachment

DISTRIBUTION "D"

LOS ANGELES POLICE DEPARTMENT COMMUNICATIONS DIVISION SIT-ALONG APPLICATION

PRINT NAME (LAST, FIRST, MIDDLE, MAIDEN)				SOCIAL SECURITY NUMBER			DATE				
STREET ADDRESS				CITY		STATE		ZIP		RESIDENCE PHONE	
DRIVER'S LICENSE NUMBER		STATE	SEX	RACE	AGE	DATE OF BIRTH (MM/DD/YY)		HT (FT/IN)	WT	HAIR	EYES
OCCUPATION				NAME OF EMPLOYER/SCHOOL					BUSINESS PHONE		
DO YOU HAVE ANY PAST ARRESTS OR PENDING COURT CASES? <input type="checkbox"/> NO <input type="checkbox"/> YES. LIST AGENCY, CHARGE, AND DISPOSITION. USE THE BACK OF THIS FORM, IF NECESSARY.											
WHY DO YOU WANT TO PARTICIPATE IN A SIT-ALONG? WHO RECOMMENDED IT TO YOU? (EXAMPLE: DISPATCHER, POLICE OFFICER, SCHOOL INSTRUCTOR, ETC.)											
LIST PREVIOUS PARTICIPATION IN ANY SIT-ALONG PROGRAM. INCLUDE AGENCY AND DATE PARTICIPATED.											
REQUEST DAY/SHIFT OF PARTICIPATION. CHECK AS MANY AS PRACTICAL.											
SHIFT	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY				
10:00 PM - 6:30 AM											
8:00 AM - 2:30 PM											
2:00 PM - 10:30 PM											

BACKGROUND AUTHORIZATION

I understand that a criminal history check and a warrant check will be conducted as part of the application process. I hereby authorize any law enforcement agency, agencies of the government of the United States of America, and agencies of the State of California to release to the Los Angeles Police Department any and all information which said agencies or any of them have on file about me, for the limited purpose of aiding the Los Angeles Police Department in evaluating my eligibility for participation in the sit-along. This release extends to any and all information which said agencies or any of them may have about me, whether public, personal or confidential. I understand that I will not receive and am not entitled to know the contents of confidential reports received from these agencies and I further understand that these reports are privileged. I hereby release, discharge, and agree to hold harmless the agencies, their agents and representatives and any persons furnishing information from any and all liability of every nature and kind arising out of the furnishing and inspecting of such documents, records and other information. This release shall be binding on my legal representatives, heirs and assigns.

READ THIS DOCUMENT COMPLETELY BEFORE SIGNING

NOTE: THE SIGNATURE OF A PARENT OR GUARDIAN IS REQUIRED FOR APPLICANTS UNDER THE AGE OF EIGHTEEN (18) YEARS WHO WISH TO PARTICIPATE.

SIGNATURE OF APPLICANT

SIGNATURE OF PARENT OR GUARDIAN

**PLEASE COMPLETE BOTH PAGES
FOR DEPARTMENTAL USE ONLY**

DATE/TIME OF SIT-ALONG _____

SUPERVISOR _____

DISPATCHER _____

INDEMNITY AND HOLD HARMLESS AGREEMENT

Whereas the undersigned

- being an employee or agent of the City of Los Angeles
- not being a member, employee or agent of the Los Angeles Police Department or City of Los Angeles

has made a voluntary request for permission to sit-along as a guest or observer in the Communications Dispatch Center with a member of the Los Angeles Police Department during the active performance of that member's official duties as a Police Dispatcher.

Now, therefore, in consideration of the City of Los Angeles, a Municipal Corporation, by and through its Police Department, cooperating in making available to the undersigned the necessary personnel and the use of its equipment and facilities for the aforesaid purpose, I, the undersigned, expressly agree to and knowingly HEREBY DO ASSUME ALL RISKS arising in the course of said activity, including personal injury, property damage or death, on behalf of myself, my heirs, executors, administrators, and assigns, and does hereby voluntarily release, discharge, waive and relinquish any and all claims and causes of action from personal injury, property damage or wrongful death against the City of Los Angeles, its dispatchers, employees and agents, which may occur during my participation in the sit-along. I understand that any aspect of police work can be a dangerous activity, and I agree to participate with knowledge of the risks.

The undersigned specifically agrees to defend, indemnify and hold harmless the City, its dispatchers, officers, agents and employees, from and against any and all claims, loss, damage and liability for injury to the undersigned person or property, including any such claim, loss, damage and liability caused by the negligence, wrongful acts or omissions of the City, its dispatchers, agents, officers and employees, or acts of others. The undersigned also specifically agrees to indemnify and hold harmless the City, its dispatchers, officers, agents and employees from and against any and all claims, loss, damage and liability for injury to the person or property of another or others, directly or indirectly caused by the undersigned's negligence, wrongful acts or omissions occurring while a guest or observer in any Los Angeles Police facility or vehicle or while accompanying a member of said department during the active performance of his or her official duties as a police dispatcher.

READ THIS DOCUMENT COMPLETELY BEFORE SIGNING

I have read and voluntarily signed this "Indemnity and Hold Harmless Agreement" and acknowledge the significance of it. I agree that no oral representations, statements or inducements have been made to me which are not set forth in this document.

NOTE: THE SIGNATURE OF A PARENT OR GUARDIAN IS REQUIRED FOR APPLICANTS UNDER THE AGE OF EIGHTEEN (18) YEARS.

Date: _____

Date: _____

SIGNATURE OF APPLICANT

SIGNATURE OF PARENT OR GUARDIAN

Completed forms may be returned by Mail to 9-1-1 Center, 100 N. Los Angeles Street, Los Angeles, CA 90012,
or faxed to 213-978-6595

FOR POLICE DEPARTMENT USE ONLY

<input type="checkbox"/> APPROVED	WATCH COMMANDER	DATE	<input type="checkbox"/> CDL CLEAR
<input type="checkbox"/> DISAPPROVED			<input type="checkbox"/> CWS CLEAR
<input type="checkbox"/> APPROVED	ASSISTANT COMMANDING OFFICER	DATE	<input type="checkbox"/> CJIS/NCIC CLEAR
<input type="checkbox"/> DISAPPROVED			<input type="checkbox"/> CRIMINAL HISTORY CLEAR
<input type="checkbox"/> APPROVED	COMMANDING OFFICER	DATE	CONDUCTED OR COMPLETED BY: _____
<input type="checkbox"/> DISAPPROVED			
COMMENTS:			