Law Enforcement Recruitment Bonus Payment Program Acknowledgment Form

I, (i1	nse	rt officer's full legal name here), a newly employed law
		ement officer with (insert name of Employing Agency)
amo undo two undo	oun ers ye	loying Agency") have been determined eligible to receive a recruitment bonus payment in the t of \$ through Florida's Law Enforcement Recruitment Bonus Payment Program. I tand that I must maintain continuous full-time employment with an Employing Agency for at least ears from the date on which I obtained my law enforcement certification in Florida. I further tand that I will be required to reimburse the Florida Department of Economic Opportunity (DEO) to maintain continuous employment for the required two-year period.
Ву 1	my	signature below, I acknowledge the following:
		ill be responsible for reimbursing the full amount of the recruitment bonus payment if either of the lowing circumstances apply:
	A.	When I voluntarily separate from employment with an Employing Agency as indicated in my Affidavit of Separation, form CJSTC-61, revised August 12, 2021, effective 6/2022, incorporated by reference in Rule 73B-12.001, F.A.C., and have a break in service of more than 15 calendar days as indicated on my Global Profile Sheet maintained by the Florida Department of Law Enforcement (FDLE).
]	B.	When my separation reason is indicated under 7D, 7E, or 7F in the Affidavit of Separation submitted by the Employing Agency or a subsequent law enforcement agency to FDLE.
		am required to reimburse DEO for the recruitment bonus payment, the process that DEO will use seek reimbursement is as follows:
	A.	DEO will send a determination letter to my last-known mailing address. Consequently, it is my responsibility to ensure that DEO has my current mailing address.
]	В.	The determination letter will describe the amount owed, reason, method and the time frame for reimbursement.
(C.	Reimbursement of a bonus payment must be made to DEO within 12 months of the date on the determination letter unless I receive approval in writing from DEO for an extension not to exceed six months.

III. Reimbursement will not be required if I am discharged by the Employing Agency for a reason other

and maintained by FDLE.

than misconduct as designated on the Affidavit of Separation completed by the Employing Agency

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IV. By signing this Law Enforcement Recruitment Bonus Payment Program Acknowledgment Form, I

acknowledge that I have read and understand the responsibilities and process for reimbursing a

recruitment bonus this form knowing	payment, if required. By signing, I also ackr ly and voluntarily.	nowledge and agree that I have signed
Officer Signature:		-
Print Name:		-
Date Signed:		-
Witness Signature:		-
Print Name:		-

Date Signed: