



**CUSTOMIZED TRAINING AGREEMENT
BETWEEN
Jackson County Sheriff's Office (Employer)
AND
CareerSource Chipola (CSC)**

IT IS THE RESPONSIBILITY OF BOTH THE CSC STAFF MEMBER AND THE EMPLOYER TO REVIEW EACH ITEM LISTED IN THIS AGREEMENT.

■ PART 1. EMPLOYER INFORMATION:

| | | |
|-------------------------------------------------------------------------|------------|--------------------------------------------------------------------|
| EMPLOYER NAME: JACKSON COUNTY SHERIFF'S OFFICE | | |
| STREET ADDRESS: 4111 GOV. RICK SCOTT DRIVE | | |
| CITY: MARIANNA | ZIP: 32448 | COUNTY: JACKSON |
| PHONE: (850) 557-7737 | | FAX: (850) 482-9662 |
| EMPLOYER CONTACT PERSON TITLE: GINA PATRICK | | EMPLOYER EMAIL ADDRESS: |
| COMPANY RATE OF REIMBURSEMENT: 50% OF THE ALLOWABLE COSTS. | | NUMBER OF TRAINEES/PARTICIPANTS TO BE TRAINED IN THIS AGREEMENT: 1 |
| AMOUNT OF THIS AGREEMENT NOT TO EXCEED: \$28,000 REIMBURSEMENT FROM CSC | | |

■ PART 2. TRAINING SUMMARY:

1. Training Provider: Jackson County Sheriff's Office
2. Address: 4111 Gov. Rick Scott Drive, Marianna, FL 32448
3. Federal Identification Number: 596000683
4. Phone #: (850) 557-7737
5. Rate(s) of Pay for those being trained: \$20.90
6. Description of Training Program: See Attachment
7. Number of Individuals to be trained: 1
8. Will Trainee/s Be Hired Before Training? No
9. Program Starting Date: February 7, 2024 Program Ending Date: February 7, 2026
10. Length of Course: 3500-4000 hours
11. Total Cost of Course/Program: \$137,471.40
12. Employer In-Kind Contributions: \$109,471.40 (listed below)
(All costs must be substantiated by calculations or determination of reasonableness)

An equal opportunity Worksite Provider/program. Auxiliary aids and services available upon request to individuals with disabilities. Persons using TTY/TTD equipment use Florida Relay Service

Training Equipment Purchase (itemize): \$15,225

Travel: N/A
(Specify travel charges and/or mileage costs)

Trainer/Instructor Wages: \$33,123.20 – In-kind from employer

Trainee Wages: \$61,123.20
Miscellaneous: N/A
Facility usage (must be itemized) – N/A
Ex: Bldg Size – Square Footage, etc.
Number of hours used: N/A
Hourly/Daily Cost of Equipment use/rental: N/A
Cost of Energy Used (per hour, per day): N/A

13. Location of Training: Jackson County Sheriff's Office
14. Employer will allow the CareerSource Chipola System to refer qualified job candidates to fill any vacancies realized through the advancement of those trained and not filled internally.
15. The training request will increase the competitiveness of the Employee and the Employer.
16. The training will result in job retention.
17. The training request relates to the introduction of new technologies; changing industry requirements; introduction to new product lines, production, or service procedures; or upgrading to new jobs that require additional skills.
18. Employer understands CareerSource Chipola funding assistance cannot be used to directly or indirectly assist, promote, or deter union organizing.
19. Employer understands CareerSource Chipola funding assistance cannot be used to directly or indirectly aid in the filling of a job opening which is vacant because the former occupant is on strike, or is being locked out in the course of a labor dispute, or the filling of which is otherwise an issue in a labor dispute involving work stoppage.
20. Employer must meet the Fair Labor Standards Act requirements for an Employee-Employer Relationship (Must meet Florida Minimum Wage Standard).
21. Employer will provide a copy of the I-9 form or E-Verify for all trainees. Providing documentation proof is a WIOA Eligibility Requirement.
22. Employer agrees to submit a copy of the skills attainment certificate.
23. Employer agrees to provide CareerSource Chipola with training provider invoice and proof of payment to the training provider for services rendered (i.e., copy of cancelled check, bank/credit card statement, etc.). (the portion not paid by CSC can be used as "in-kind" for the employer).
24. **Reimbursement Guidelines**

1. Employer must maintain payroll records that document the days and hours of training for each participant for use as "in-kind" documentation.
2. Employer must submit CSC Invoice and all supporting documentation for which they are requesting reimbursement **MONTHLY**. If employer fails to submit timely invoices for payment (with supporting documentation), this Agreement may be voided.
3. Payments are generally made within 30 days of receiving a correct invoice and all required back-up documentation.
4. **Acceptable documents required by finance:**
 - a. Customized Training Invoice Form
 - b. W-9 (Request for Taxpayer Identification Number and Certification)
 - c. Customized Training Agreement (if modification, include that as well)

- d. Customized Training Description (if modification, include that as well)
- e. Customized Training Vendor Information Form
 - A copy of the employer's current UC Report (Dept. of Revenue)
 - A copy of employer's Worker's Compensation Certificate (UI)
- f. Contractor Disclosure and Certification Form
- g. Monthly Timesheets (must match employer payroll documentation)
- h. Payroll Documentation from Employer
- i. Employment Verification Form
- j. Case Note (a copy of)

Note: Reimbursement will not be made if the required documentation is not submitted.


- 5. In no event shall total payments exceed the Training Agreement amount nor shall the total reimbursement 50 percent of the allowable costs.
- 6. Invoices and supporting documentation must be submitted to:
 - CareerSource Chipola
 - ATTN: Success Coach
 - 4636 Hwy. 90, Suite E
 - Marianna, FL 32446

■ PART 3. BUDGET

| Budget Category | CSC Contribution | Employer Contribution | Total Program Cost |
|-----------------|------------------|-----------------------|--------------------|
| Course Cost | \$28,000 | \$109,471.40 | \$137,471.40 |
| Total Costs | \$28,000 | \$109,471.40 | \$137,471.40 |

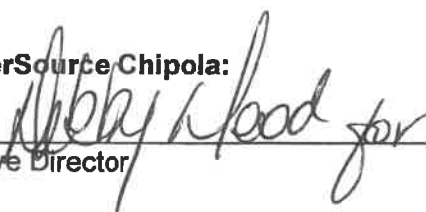
In Witness thereof, the parties hereto have made and executed this document.

As to Employer:

By: 
 Jackson County Sheriff's Office

Date: 2/7/2024

As to CareerSource Chipola:

By: 
 Executive Director

Date: 2/7/2024

TRAINING INFORMATION/JOB DESCRIPTION

Note: A separate Training Outline/Job Description Must be Completed if Multiple Types of Positions Needed for Customized Training.

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| EMPLOYER NAME/TITLE: JACKSON COUNTY SHERIFF'S OFFICE | | |
| MAILING/TRAINING ADDRESS: 4111 GOV. RICK SCOTT DRIVE | | |
| CITY: MARIANNA | ZIP: 32448 | COUNTY: JACKSON |
| PHONE: (850) 557-7737 | FAX: (850) 482-9562 | EMAIL: |
| EMPLOYER SUPERVISOR'S NAME (IF DIFFERENT FROM CONTACT): MAJOR WES BURCH | | |
| TOTAL NUMBER OF POSITIONS FOR THIS JOB TITLE: 1 | HOURS PER WEEK: 40 | HOURLY RATE: \$20.90 |
| OCCUPATIONAL TITLE: APPRENTICE DEPUTY SHERIFF | O*NET CODE: 33-3051.00 | |
| TRAINEE/PARTICIPANT JOB TITLE: APPRENTICE DEPUTY SHERIFF | SHIFT WORK HOURS: 40 PER WEEK | DAYS OF WORK (CHECK ALL THAT APPLY): <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> TH <input type="checkbox"/> F <input type="checkbox"/> S <input type="checkbox"/> SU SCHEDULE WILL FLUCTUATE |
| JOB DESCRIPTION (EMPLOYER MAY ATTACH COPY OF THIS DOCUMENT): PLEASE SEE ATTACHED JOB DESCRIPTION. SEE APPRENTICESHIP DOCUMENTATION. | | |
| QUALIFICATIONS REQUIRED: PLEASE SEE ATTACHED JOB DESCRIPTION | | |
| BENEFITS: 12 PAID HOLIDAYS, INSURANCE | | |
| SKILLS TRAINEE/PARTICIPANT WILL LEARN: FOLLOW GUIDELINES ISSUED IN THE APPRENTICESHIP DOCUMENTATION. | | |
| PROJECTED TIME TO LEARN SKILLS: 3500-4000 HOURS | | |

Debby Wood

From: Richard Williams
Sent: Wednesday, February 28, 2024 10:21 AM
To: Debby Wood
Subject: Re: Customized Training Agreement - JCSO

yes.

Richard Williams
Executive Director
CareerSource Chipola
4636 Highway 90 East, Suite K
Marianna, FL 32446
Office: 850.633.2732
Cell: 850.557.2441



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From: Debby Wood <Debby.Wood@careersourcechipola.com>
Sent: Wednesday, February 28, 2024 11:20 AM
To: Richard Williams <Richard.Williams@careersourcechipola.com>
Subject: Customized Training Agreement - JCSO

Are you okay with me signing the Customized Training Agreement with JCSO for you? You already signed the CT Application.

Thanks.

Debby Wood
Program & Center Director
CareerSource Chipola
4636 Highway 90 East, Suite E
Marianna, Florida 32446
Office: 850.633.2757
Cell: 850.557.3133
Fax: 850.718.0334

