



AGREEMENT BETWEEN  
GRAMBLING STATE UNIVERSITY POLICE DEPARTMENT  
AND

I, \_\_\_\_\_, do hereby acknowledge, affirm and declare that I am employed as a Police Officer at Grambling State University in Grambling Louisiana. I have been informed and affirm that I understand that as a Police Officer, I must attend and successfully complete a Peace Officer Standard Training (P.O.S.T.) Basic Police Training Academy (“the Academy”) in order to acquire the credentials required to be a certified Police Officer. (If accepted, initial each line below and sign where indicated).

\_\_\_\_\_ I understand and hereby acknowledge that payment of a \$1100 fee is required to attend the Academy and that said fee will be paid for me by Grambling State University (sometimes herein “GSU”) upon my agreement to accept employment as a GSU Police Officer and to work at Grambling State University for a period of no less than two (2) years following the completion of the Academy.

\_\_\_\_\_ I agree and understand that if I resign prior to satisfying the minimum period of service as a Police Officer that I am obligated to agree to reimburse Grambling State University \$1500, the amount paid by the institution for me to attend the Academy and supplies.

\_\_\_\_\_ I acknowledge, understand and agree that by affixing my signature below that, I accept employment at Grambling State University as a Police Officer and the terms and conditions set forth in this agreement, including the repayment obligations that are related to payments made on my behalf by GSU for attending P.O.S.T. Academy.

\_\_\_\_\_ I hereby agree and authorize Grambling State University to deduct all amounts due and owing to Grambling State University as a result of my failure to fulfill this agreement from my final paycheck, terminal pay check or other amounts due me from the University, including all amounts/fee paid on my behalf to attend any P.O.S.T Academy.



By affixing my signature below, I acknowledge that I have read and understand the agreement in its entirety and that I agree and accept all the terms and conditions herein stated as applicable to me. I further understand that upon fulfilling the P.O.S.T. certification and employment terms stated herein this Agreement will terminate and I will be released there from.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
G#

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief/Designee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date