



FLORIDA DEPARTMENT OF JUVENILE JUSTICE

DROP LEAVE PAYMENT REQUEST

You are entitled to be paid up to a maximum of 240 hours of annual leave (480 for SES/SMS) upon entering DROP or terminating from the DROP. Should you decide to be paid upon entering the DROP, any hours over 240 or 480 will be carried over into the DROP. (If you are paid the maximum number of hours upon entering DROP, all annual leave accruals must be used prior to your termination from the DROP or they will be forfeited.)

I, _____, _____, will be entering the
(Please print First , MI, Last name) (PF ID #)

DROP on _____ and will resign on _____.

I am requesting to be paid the following annual leave hours, which will be used in computing my Average Final Compensation (AFC).

- _____ Career Service (Please indicate the amount up to a maximum of 240 hours)
- _____ SES/SMS (Please indicate the amount up to a maximum of 480 hours)
- I do not wish to be paid for annual leave upon entering DROP.

(Signature)

(Date)

SPECIAL NOTES:

You will be paid for special compensatory leave earned prior to July 1, 2012 upon terminating from DROP or transferring to another agency.

Should you desire to defer your annual leave payment to your deferred compensation account, please contact your deferred compensation representative to complete the appropriate documents.

Return this form to:

DJJ HQ Bureau of Human Resources
Attn: Retirement Coordinator
2737 Centerview Drive
Tallahassee, FL 32399-3100

2737 Centerview Drive • Tallahassee, Florida • 32399-3100 (850) 488-1850
<http://www.djj.state.fl.us>