

**FDLE**Florida Department of  
Law Enforcement**AFFIDAVIT OF SEPARATION**Incorporated by Reference in Rules  
11B-20.001(3)(a)5.a., and 11B-27.002(3)(a)15., F.A.C.**CJSTC  
61**

1. Last Four Digits of Social Security Number: <u>1639</u>	<b>Employment Class</b> <input checked="" type="checkbox"/> Law Enforcement <input type="checkbox"/> Correctional <input type="checkbox"/> Correctional Probation <input type="checkbox"/> Concurrent <input type="checkbox"/> Special Elected or Appointed <input type="checkbox"/> Instructor <b>Employment Type</b> <input checked="" type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Auxiliary
2. Name: <u>Mangrum</u> <u>Chad</u> <u>N.</u> Last First MI	
3. Agency Name: <u>Brevard County Sheriff's Office</u>	
4. Agency ORI: <u>FL0050000</u>	
5. Date employed: <u>10/22/2012</u> 6. Separation Date: <u>1/1/2017</u>	

**7. Separation Reasons**

<b>7A. ADMINISTRATIVE - ROUTINE</b> <input type="checkbox"/> Voluntary separation not involving misconduct <input type="checkbox"/> Transfer within agency. No break in service <input type="checkbox"/> Retired. Not involving misconduct <input type="checkbox"/> Deceased <input type="checkbox"/> Budgetary Constraints. Local and Federal grants not renewed. <input type="checkbox"/> Extended leave of absence Type: _____ Periods of Time: _____ <input type="checkbox"/> Military leave of absence Periods of Time: _____ <input type="checkbox"/> Suspension Periods of Time: _____ <input type="checkbox"/> Administrative separation not involving misconduct. <input type="checkbox"/> Special elected or appointed Position: _____ Anticipated term: _____ <input type="checkbox"/> Instructor request for change of affiliation <b>7B. ADMINISTRATIVE - NON-ROUTINE</b> <input type="checkbox"/> Failure to complete basic recruit training <input type="checkbox"/> Failure to pass the State Officer Certification Examination	<b>7C. ADMINISTRATIVE - SUBSTANDARD PERFORMANCE</b> <input type="checkbox"/> Failure to satisfactorily complete agency field training program (training performance issues) <input type="checkbox"/> Failure to perform assigned tasks satisfactorily <b>7D. OTHER - EXAMPLE</b> <input type="checkbox"/> Excessive absenteeism; failure to report for duty and sleeping on duty, and etc. <b>7E. UNFAVORABLE - MISCONDUCT</b> <input type="checkbox"/> Voluntary separation or retirement while being investigated for violation of agency or training school policy not involving a moral character violation defined in Rule 11B-27.0011, F.A.C. <input checked="" type="checkbox"/> Voluntary separation or retirement in lieu of termination for violation of agency or training school policy not involving a moral character violation defined in Rule 11B-27.0011, F.A.C. <input type="checkbox"/> Terminated for violation of agency or training school policy (Not involving a moral character violation defined in Rule 11B-27.0011, F.A.C.) <b>NOTE: The agency administrator or designee shall provide written documentation of the internal or criminal investigation upon request by Commission staff.</b>	<b>7F. Form CJSTC-61A must be completed and submitted with form CJSTC-61 for any of the following:</b> <input type="checkbox"/> Voluntary separation or retirement while being investigated for violation of Section 943.13(4), F.S., or violation of moral character standards defined in Rule 11B-27.0011, F.A.C. <input type="checkbox"/> Voluntary separation or retirement in lieu of termination for violation of Section 943.13(4), F.S., or violation of moral character standards defined in Rule 11B-27.0011, F.A.C. <input type="checkbox"/> Terminated for violation of Section 943.13(4), F.S., or violation of moral character standards as defined by Rule 11B-27.0011, F.A.C. <b>NOTE: The agency administrator or designee shall provide written documentation of the internal or criminal investigation upon request by Commission staff.</b>
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**NOTICE:** Section 943.139(2), F.S., requires the execution of an Affidavit of Separation by the employing agency in a case of officer separation. If the officer is separated, whether voluntary or involuntarily, for failure to comply with provisions of Section 943.13, F.S., the agency is required to so specify when completing the Affidavit of Separation Supplement form CJSTC-61A. **WARNING:** Intentional false execution of this Affidavit of Separation constitutes a misdemeanor of the second degree.

8. Agency Administrator or Designee's Signature: Lisa Gillis  
 9. Agency Administrator or Designee's Printed Name: Lisa Gillis, HR Manager  
Brevard Co. Sheriff's Office  
700 S. Park Ave.  
Titusville, FL 32780  
(321) 264-5212  
 10. Date: 3/15/17  
 11. Agency Administrator or Designee's Title: \_\_\_\_\_

**12. OATH**

Pursuant to Section 117.05(13)(a), Florida Statutes

STATE OF FLORIDA, COUNTY OF Brevard  
 Sworn to (or affirmed) and subscribed before me this 15th day of march, year 2017  
 By Lisa Gillis  
DEBRA L. MOODY  
 Notary Public, State of Florida  
 No. FF 231418  
 Commission Expires 03/15/2020  
 Type of Identification Produced: \_\_\_\_\_  
 Personally Known ☒ OR Produced Identification ☐