

IMMEDIATE ATTENTION



STATE OF MISSISSIPPI
DEPARTMENT OF PUBLIC SAFETY
DIVISION OF PUBLIC SAFETY PLANNING

TATE REEVES
GOVERNOR

SEAN TINDELL
COMMISSIONER

March 21, 2022

To: **Chiefs/Law Enforcement Administrators**

From: BLEOST Staff

RE: **MISSISSIPPI LAW ENFORCEMENT AND FIRE FIGHTERS PREMIUM PAY FUND**
Full-Time and Part-Time Law Enforcement Officer Rosters

House Bill 1427 from the 2022 Regular Legislative Session provides a \$1000.00 hazard duty payment to first responders around the State of Mississippi. Under this bill, both full-time and part-time law enforcement officers and firefighters are eligible for the payment. In anticipation of the passage of this bill, the Office of Standards and Training is required to validate each department's sworn officer roster before the payments are made.

Please complete and return the enclosed forms with the information requested on all active officers working for your department as soon as possible. If an officer is not on record with Standards and Training, officers will not be eligible to receive the payment.

Mississippi Code as Annotated, §45-6-7 requires the submission of reports and information by law enforcement agencies as requested by the Board on Law Enforcement Officer Standards and Training.

If you do not have either Full-Time or Part-Time Officers, you must still complete the roster with 'NONE' and return to our office. **NOTE: Part-Time Officer INCLUDES ALL reserve and auxiliary officers.**

Enclosed are the Full-Time and Part-Time Rosters. If you have a computer print-out with the same information as required on these forms, you may submit the print-out. **Note: Do not send copies from a previous year, we must have original listings. Place the Chief's/Agency Head's name at the top of the list. Also, please list professional certificate numbers on the form.** BLEOST policy requires all agencies to submit a yearly roster. Updated rosters are not required when you have a new hire or if an officer has left your department. **Rosters or computer print-out must be signed and dated by authorized signee.**

Remember that we need an Application for Certification form when you hire an officer and a Termination/Reassignment form when an officer leaves employment. If you have not completed these forms on the officers as it applies, please do so at this time and send with rosters to our office.

Your immediate response within ten (10) days from the date of this letter will be very much appreciated. Should you have questions, please contact Mary L. Bailey at 601-977-3775.

INSTRUCTIONS

This form is to be completed by the employing agency/department and returned to this office within thirty days of receipt. Make as many copies of this form as needed. You may use your own computer-generated form(s) only if it contains all the information that is requested on this form.

1. When completing this form type or print in ink.
2. Type the name of the employing agency/department and the phone number.
3. Enter the department's mailing address and the department's fax number (if applicable).
4. Enter the department's email address.
5. Enter "N/A" in the first space under Name if your department does not employ anyone who would be considered a part-time, reserve, or auxiliary officer, sign and return the form to the address listed below.
6. Record each officer's full name (last, first and middle names), social security number, position or rank, date of employment as a part-time, reserve, or auxiliary officer (month/day/year) and his/her certificate number found in the bottom left hand corner of the Board on Law Enforcement Officer Standards and Training (BLEOST) Professional Certificate. If the officer has not yet been certified by BLEOST, then enter **N C**. If the officer meets the required standards for certification, but your department has not yet received his/her certificate, then call this office for the certificate number.
7. This form must be signed and dated by the head of the agency, or the form must be signed and dated by someone with the authority to do so. If the later is the case, then we must have a letter, on file at this office, stating specifically who has such authority. This letter will have to be authorized by the head of the agency.
8. Once completed, signed and dated return to the address below.

MS Dept. of Public Safety/Div. Of Public Safety Planning/
Office of Standards and Training
1025 Northpark Drive
Ridgeland, MS 39157

Telephone (601) 977-3777; Facsimile - (601) 977-3773

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