

Levy County Board of County Commissioners Agenda Item Summary Form

1		Name	:	Mitch Harrell			
2	2.	Organization/Title/Telephone:		Public Safety/Direc	Public Safety/Director/352-486-5209		
3	3.	Meeti	ng Date:	Tuesday, Decembe	Tuesday, December 22, 2020		
Rete Agre	ntio	Reque: on Ince	sted Motion/Action: sting the Board's approval on Res entive Program for full time Public and authorizing the Director of Pul soard.	Safety Paramedics and	EMTs as well a	s Form	
5	5.	Agend	a Presentation:	Yes ⊠	No □	N/A □	
6	5.		Requested: Request will be granted if Possible	·	lick or tap to enter a date. ted time not more than 15 minutes		
7	' .	Is this	Item Budgeted (If Applicable):	Yes □	No □	N/A ⊠	
8	3.	If no, S	State Action Required:				
		a.	Budget Action:	EnterTextHere			
		b.	Financial Impact Summary Statement:	EnterTextHere			
		c.	Detailed Analysis Attached	EnterTextHere			
		d.	Budget Officer Approval:	EnterTextHere			
If approved enter date: Click or tap to enter a date.							
Background: (Why is the action necessary, and what action will be accomplished) (All supporting documentation must be attached if any)						shed) (All	
	This program will provide an additional tool to recruit and retain qualified Paramedics EMTs for the Public Safety Department.						
1	0.	Recommended Approval					
		a.	Department Director:	Yes ⊠	No □	N/A □	
		b.	County Attorney:	Yes ⊠	No □	N/A □	
		c.	County Coordinator:	Yes ⊠	No □	N/A □	
		d.	Other:	Yes □	No □	N/A □	