**CYBERCORPS® SCHOLARSHIP FOR SERVICE**

**LOAN AGREEMENT AND PROMISSORY NOTE**

**As required by the National Science Foundation, Award 1565215**

**DIRECTIONS:** Students selected to receive a CyberCorps® Scholarship for Service (SFS) must read this agreement and promissory note, and provide the required information and signature. The original form of this agreement and promissory note is to be sent by the recipient to: Dr. Mike Burmester, Principal Investigator of the CyberCorps® SFS project, Department of Computer Science, Florida State University, 1017 Academic Way, Tallahassee, FL 32304. The recipient should make two copies of the original form with (i) one copy to be retained by the recipient and (ii) one copy to be sent by the recipient to Cathi Bass, Assistant Director, Sponsored Research, 874 Traditions Way, Tallahassee, FL 32304.

**STUDENT INFORMATION SECTION**

Recipients of the CyberCorps® Scholarship for Service (SFS) are required to provide the following information to the Florida State University (FSU), and inform FSU if any of the below identifier information changes.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (First, Middle Initial, Last)

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Address (street, city state, zip code):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Local Address (street, city, state, zip code): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number (Include are code): \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver’s License Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (List state abbreviation first)

Anticipated CyberCorps® SFS Completion Date (monthly/ year): \_\_\_\_\_\_\_\_\_\_

**RECIPIENT’S INITIALS:** \_\_\_\_\_\_

**ADDENDUM: CYBERCORPS® SFS/LOAN AGREEMENT & PROMISSORY NOTE**

Students selected to receive the CyberCorps® Scholarship for Service (SFS) must comply with all program requirements. Receipt of this scholarship is contingent upon meeting all eligibility requirement and execution of this agreement and promissory note. Read and carefully consider the commitments explained before signing this document.

**I. SCHOLARSHIP AGREEMENT**

This Agreement imposes legally enforceable obligations on you (the recipient), and is an important condition of the award to you of financial assistance under CyberCorps® Scholarship for Service (SFS).

The CyberCorps® Scholarship for Service (SFS) is a loan for service agreement. It becomes repayable to Florida State University if you (the recipient):

- Fail to satisfy the academic requirements of the program for which the funds were awarded; or

- Fail to complete the service requirements of the program.

**STIPEND AND TUITION:** If an undergraduate student, the award includes a stipend of $22,500 per year ($11,250/semester) and 100% tuition from Florida State University using grant funds from the National Science Foundation (NSF), one half stipend paid at the beginning of each semester.

If a graduate student, the award includes a stipend of $34,000 per year ($17,000/semester) and 100% tuition. In the event that a student withdraws or is dismissed from the program, the payment of these stipends will cease immediately.

**OTHER PAYMENTS:** The award includes a book allowance up to $2,000 per academic year; a health insurance reimbursement allowance up to $3,000 per year; and a professional development allowance up to $4,000 per year. These will be paid as receipts are submitted to the project administrator for reimbursement.

**COMMITMENT OBLIGATION:**  The CyberCorps® Scholarship for Service (SFS) program seeks to prepare cybersecurity professionals for employment in the government sector (federal, state, local, tribal, or territorial government organization). The following are the approved places to work (per the Cybersecurity Enhancement Act of 2014, as amended, which covers the Scholarship for Service Program:

1. A Federal Executive Agency
2. Congress, including any agency, entity, office, or commission established in the legislative branch (i.e. GAO)
3. An interstate agency
4. State, local, or Tribal government
5. State, local, or Tribal government-affiliated non-profit that is considered to be critical infrastructure as defined in section 1016(e) of the USA Patriot Act
6. Educators in the field of cybersecurity at qualified institutions of higher education that provide scholarships under this section.

Upon graduation, you (the recipient) agree to work in any full-time position that includes duties in Cybersecurity/Information Assurance at one of the locations above for a period equivalent to the length of your scholarship. An academic year (i.e., the fall and spring semesters) is equivalent to a calendar year of employment. You also agree to seek an internship and work in an approved place of work during the summers of your award. You also agree to provide employment data and updated contact information to program staff on an annual basis. Failure to honor these commitments will result in repayment.

**EVALUATIONS:**  In order to learn more about the design, implementation and impact of the program, CyberCorps® Scholarship for Service (SFS) conducts ongoing evaluations. You agree to participate in these evaluations. The program will continue to collect data about your placement and retention. These data will

only be used to evaluate the program as a whole. All interview and observational data are confidential.

**RECIPIENT’S INITIALS:** \_\_\_\_\_\_

**THE RECIPIENT MUST**

* Be a full-time student pursuing a bachelor’s or master’s degree in a coherent formal program that is focused on cyber security at Florida State University, or research-based doctoral student.
* Be a citizen or a lawful permanent resident of the United States.
* Meet criteria for Federal employment; and
* Be able to obtain a security clearance, if required.

**II. PROMISSORY NOTE**

I (the recipient) agree that if I fail to meet the conditions described in: Item I, Participant Responsibilities, of the SFS Service Agreement, or if I fail to satisfy the academic requirements of the degree program, I will repay the full amount of the Scholarship received to Florida State University Office of Sponsored Research.

**A. COLLECTION CHARGES:**

I understand and accept that if I fail to make timely payments of my financial obligation to the Institution or fail to make acceptable payment arrangements to bring my account current, the Institution may refer my delinquent account to a collection agency. I further understand that I may be responsible for paying the collection agency fee, including reasonable attorney’s fees, necessary for the collection of my delinquent account. Finally, I understand that my delinquent account may be reported to one or more of the national credit bureaus.

**B. REPAYMENT**

I agree to enter repayment status on the first day of the first month after the earliest to occur of any of the following:

1. FSU has determined that I have ceased to be enrolled in either of the appropriate baccalaureate or master’s degree program; or
2. The date that I inform FSU and/or the Federal Office of Personnel Management (OPM) that I do not plan to fulfill my government employment obligation; or
3. The date that FSU and/or OPM ascertains that I have ceased to be employed in an eligible government institution prior to fulfilling my employment obligation.

**C. CONDITIONS FOR DEFERRALS OR EXCEPTIONS TO PERFORMANCE OR REPAYMENT**

You may be granted an exception to the repayment requirement of this Agreement in whole or in part, if you are unable to continue the required course of study or perform the service obligation because of a disability that is expected to continue indefinitely, or because of death. Deferral of your repayment requirement may be granted during the time in which:

1. You serve, not in excess of three years, on active duty as a member of the armed service of the United States;
2. You serve as a volunteer under the Peace Corps Act;
3. You serve as a volunteer under Title I of the Domestic Volunteer Service Act of 1973;
4. You have a disability which prevents you from working for a period not exceeding three years.

During the time I qualify for any of the exceptions described in this Item IIC, I am not required to make Scholarship repayments described in Item IIB. In order to qualify for any of these exceptions, I must promptly notify FSU of my claim and provide supporting documentation acceptable to FSU.

**RECIPIENT’S INITIALS:** \_\_\_\_\_\_

**D. CANCELLATION:**

FSU shall cancel my repayment obligation if it determines:

1. On the basis of a sworn affidavit of a qualified physician, that I am unable to work because of an impairment that is expected to continue indefinitely or results in death.
2. That I have become totally and permanently disabled as established by a sworn affidavit of a qualified physician.
3. On the basis of a death certificate or other evidence of death that is conclusive under Florida law.
4. Circumstances have occurred that FSU considers as a compelling reason to excuse repayment.

**E. GENERAL:**

1. I agree to advise FSU promptly in writing of any change in name, address, or deferment status as described in Section IIC.
2. I understand that I must complete the baccalaureate or master’s degree program.
3. I understand that I must maintain satisfactory academic progress as determined by FSU and by the CyberCorps® Scholarship for Service (SFS) and that Scholarship stipends will end if I do not make satisfactory progress toward a degree.
4. Communications on cancellation, repayment, or deferment should be made to FSU, Sponsored Research, 874 Traditions Way, Tallahassee, FL 32304.
5. I understand that it is my responsibility to determine what, if any, tax liability will accrue to me as a result of accepting financial assistance under CyberCorps® Scholarship for Service (SFS). All tax liabilities, if any, are my responsibility to discharge.

**RECIPIENT’S INITIALS: \_\_\_\_\_\_**

By accepting Scholarship for Service (SFS) funds I understand and agree that:

1. the CyberCorps® Scholarship for Service (SFS) is a Repayable Scholarship;
2. I am receiving a loan which must be repaid, in whole or in part, if I fail to satisfy the academic requirements of the program for which the funds were awarded, or fail to complete the government employment requirements of the program.
3. FSU is responsible for collecting the funds owed to the Federal Government as a participating institution due to Participant’s breach of the Agreement;
4. a breach of the Agreement will result in
   1. an immediate financial hold being placed on my account by FSU with all the restrictions that result from student holds,
   2. forfeiture of the entire scholarship award and cause all funds extended to me, or to FSU for my benefit, to become a debt owed to the Federal Government as described under the heading “II. Participant Reimbursement to the Federal Government” of the CyberCorps® Service Agreement;
5. Removal of the financial hold placed on my account at FSU will require one of the following actions:
   1. a lump sum payment to FSU for all amounts owed to the Federal Government resulting from the breach of the agreement, or
   2. the execution of a promissory note and financing agreement on terms negotiated with FSU that are in compliance with the provisions set forth in part B or D of Title IV of the Higher Education Act of 1965.
6. My rights and obligations under this loan are contained in the above terms and conditions.
7. I have read and understand the terms set forth in this addendum, and that this addendum does not release me from any of my responsibilities under the Agreement.

Please indicate your acceptance of these terms and conditions by signing this agreement and promissory note and returning it to: Dr. Mike Burmester, Principal Investigator of the CyberCorps® SFS project, Department of Computer Science, Florida State University, 1017 Academic Way, Tallahassee, FL 32304.

Recipient Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Recipient’s Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_