

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Tallahassee TEMPO & TFLA Workforce Training and Education for Opportunity Youth
2. Date of Submission: 11/12/2019
3. House Member Sponsor: Ramon Alexander
Members Copied: Loranne Ausley, Jason Shoaf

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes
If answer to 4a is "No" skip 4b and 4c and proceed to 4d, Col. E
- b. What is the most recent fiscal year the project was funded? 2019-20
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? Yes
- d. Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2019-20 <i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2020-21 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
Column:	A	B	C	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget <i>(Will equal non-vetoed amounts provided in Column A)</i>	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:		150,000	150,000		503,500	503,500

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2020-21? No
 - 5a. If yes, which state agency?
 - 5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Juvenile Justice
 - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? No
 - 5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

Auditor General conducts audits for cities. Penalties and funding will be addressed in accordance with the terms outlined in the agency contract.

6. Requester:

- a. Name: Reese Goad
- b. Organization: City of Tallahassee
- c. Email: reese.goad@talgov.com
- d. Phone #: (850)891-8318

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Kimball Thomas
- b. Organization: City of Tallahassee, Director of Community Services
- c. Email: kimball.thomas@talgov.com
- d. Phone #: (850)891-8770

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: Kirk Pepper
- b. Firm: GrayRobinson
- c. Email: kirk.pepper@gray-robinson.com
- d. Phone #: (850)577-7070

9. Organization or Name of entity receiving funds:

- a. Name: City of Tallahassee
- b. County (County where funds are to be expended): Leon
- c. Service Area (Counties being served by the service(s) provided with funding): Leon

10. What type of organization is the entity that will receive the funds? (Select one)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government
- University or College

Other (Please describe)

11. What is the specific purpose or goal that will be achieved by the funds being requested?

To build a pipeline to connect opportunity youth to educational opportunities, jobs and skills building initiatives through the city of Tallahassee Engaged in Meaningful Productivity for Opportunity youth (TEMPO) and the Tallahassee Future Leaders Academy (TFLA) programs.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter "0" if request is zero for the category
Administrative Costs:		
<input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> b. Other Salary and Benefits		
<input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Travel for program participants to attend local, state and national conferences.	5,000
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	1. Workforce scholarships for licenses or certificates in vocational or technical skill areas; 2. Scholarships for program participants to attend college; 3. Peer-to-peer ambassador stipends for program support to potential new program participants.	498,500

Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		503,500

13. For the Fixed Capital Costs requested with this issue (In Question 12, category “h. Fixed Capital Outlay” was selected), what type of ownership will the facility be under when complete? (Select one correct option)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government (e.g., police, fire or local government buildings, local roads, etc.)
- State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)
- Other (Please describe)

14. Is the project request an information technology project?

No

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

City of Tallahassee Commission Board Docs., TEMPO webpage @ www.tal.gov.com/TEMPO and letters of program support from U.S. Representatives Al Lawson and Neil Dunn.

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

Yes

16a. Please Describe:

Opportunity Youth Network case studies on Disconnected Youth, American Community Survey Data 2017, Urban Land Institute of North Florida District area study 2015 and the City of Tallahassee Promise Zone Application 2014.

17. Will the requested funds be used directly for services to citizens?

Yes

17a. What are the activities and services that will be provided to meet the purpose of the funds?

The re-engagement of Opportunity Youth, the implementation of the (7) phases of case management, GEDs through local adult & community education provider, workforce training programs at local educational and technical center and apprenticeships with local business partners.

17b. Describe the direct services to be provided to the citizens by the funding requested.

The improvement of their respective communities, public safety, quality of life and impact on poverty.

17c. Describe the target population to be served (i.e., "the majority of the funds requested will serve these target populations or groups.").

Select all that apply to the target population:

- Elderly persons
- Persons with poor mental health
- Persons with poor physical health
- Jobless persons
- Economically disadvantaged persons
- At-risk youth
- Homeless
- Developmentally disabled
- Physically disabled
- Drug users (in health services)
- Preschool students
- Grade school students
- High school students
- University/college students
- Currently or formerly incarcerated persons
- Drug offenders (in criminal Justice)
- Victims of crime
- General (The majority of the funds will benefit no specific group)
- Other (Please describe)

17d. How many in the target population are expected to be served?

- < 25
- 25-50
- 51-100

- 101-200
- 201-400
- 401-800
- Ⓞ>800

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select each Benefit/Outcome that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
<input type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		
<input checked="" type="checkbox"/> Enrich cultural experience	Program participants will take local, state and national field trips to enhance their cultural experiences.	Program cultural experiences participation reports.
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	1. Increase the number of program participants receiving high school diplomas and/or GEDs. 2. Increase in the number of program participants enrolling and graduating from college or technical & vocational schools.	1. Program participants high school diplomas/or GEDs awarded. 2. Program participants college, technical and /or vocational school enrollment and graduation data.
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Decrease the number of program participants committing crimes.	Tallahassee Police Department, Leon County Sheriff's Office, Office of the State Attorney, and Juvenile Justice system crime data.
<input checked="" type="checkbox"/> Improve transportation conditions	Participants will be issued free City of Tallahassee transit bus passes.	Star Metro transportation data.

<input checked="" type="checkbox"/> Increase or improve economic activity	Increase the number of program participants receiving apprenticeships and finding "fair" or "living" wage jobs.	Workforce training and jobs report.
<input type="checkbox"/> Increase tourism		
<input checked="" type="checkbox"/> Create specific immediate job opportunities	Increase the number of program participants receiving immediate job opportunities.	Program participants apprenticeships job interviews and hiring reports.
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Increase the number of program participants finding jobs and reducing their need for public and federal assistance.	Program participants Workforce, SNAP, Section 8 Housing, Medicaid and Medicare reports.
<input checked="" type="checkbox"/> Reduce recidivism	Decrease the number of program participants that re-offend.	Tallahassee Police Department, Leon County Sheriff's Office, Office of the State Attorney and Juvenile Justice system crime data.
<input checked="" type="checkbox"/> Reduce substance abuse	Decrease the number of program participants that are drug dependent.	Leon County Health Department data.
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	Decrease the number of program participants in the Juvenile Justice system.	Department of Juvenile Justice data.
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		

<input type="checkbox"/> Other (Please describe):		
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19. Provide the total cost of the project for FY 2020-21 from all sources of funding (Enter "0" if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	503,500	74.2%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	175,000	25.8%	Yes
5. Other:	0	0.0%	No
TOTAL	678,500	100%	

20. Is this a multi-year project requiring funding from the state for more than one year?

Yes

20a. How much state funding would be requested after 2020-21 over the next 5 years?

- <1M
- 1-3M
- >3-10M
- >10M

20b. How many additional years of state support do you expect to need for this project?

- 1 year
- 2 years
- 3 years
- 4 years
- >= 5 years

20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select “ongoing activity”.

Ongoing activity – no total cost

<1M

1-3M

>3-10M

>10M