

# Appropriations Project Request - Fiscal Year 2018-19

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Wayman Community Development At-Risk Services Program
2. Date of Submission: 11/14/2017
3. House Member Sponsor: Kimberly Daniels  
Members Copied:

### 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? 2017-18
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2017-18 <i>(If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2018-19 <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>	<b>Additional Nonrecurring Request</b>	<b>TOTAL Nonrecurring plus Recurring Base Funds</b>  <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		150,000	150,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2018-19? 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? Yes
  - 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.

Removed from state agency vendors for at-risk youth services for two years, or until all promised deliverables/performance measures are attained.

6. Requester:

- a. Name: Mark Griffin
- b. Organization: Wayman Community Development Corporation
- c. Email: mgriffin@wayman.org
- d. Phone #: (904)693-1170

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

- a. Name: Mark Griffin
- b. Organization: Wayman Community Development Corporation
- c. Email: mgriffin@wayman.org
- d. Phone #: (904)693-1170

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

- a. Name: Phillip Singleton
- b. Firm: Singleton Consulting
- c. Email: phillip@phillipsingleton.com
- d. Phone #: (678)801-6283

9. Organization or Name of entity receiving funds:

- a. Name: Wayman Community Development At Risk Services Program
- b. County (County where funds are to be expended): Duval
- c. Service Area (Counties being served by the service(s) provided with funding): Duval

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?

WCDC is requesting \$150,000 in state funding to continue expanding its services in Duval County by hiring additional full-time and part-time counselors to at-risk youth in the community. Funds from this program will be used to reduce criminal activities among at-risk youth in Duval County by serving the nearly 30,000 juveniles and children living within Eureka Gardens, West Jacksonville, Normandy Village, Ceder Hills and Murray Hill community.

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

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter ?? if request is zero for the category
Administrative Costs:		
<input checked="" type="checkbox"/> a. Executive Director/Project Head Salary and Benefits	These funds will be used as a portion of the Executive Director's salary and the full salary of the Program Manager who will direct efforts for Wayman Community Development At-Risk Youth Program	48,000
<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 checked="" type="checkbox"/> e. Salaries and Benefits	These funds will be used to hire additional full-time and part-time Mental Health Counselors who will work directly with the Wayman Community Development At-Risk	93,000

	Services Program	
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	These funds will be used to provide youth incentives, cover program expenses and providing recreational supplies.	9,000
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
<b>TOTAL</b>		<b>150,000</b>

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)

N/A

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:

Wayman Community Development Corporation is supported by Duval County Sheriff Mike Williams, Millenia Housing Management (the owner of Eureka Gardens Apartments), and the Eureka Gardens Tenant Association.

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

No

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 funding will be used to provide a faith based life changing family services program to at-risk youth in the highest juvenile crime areas of Duval

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

Individual, group and family focused counseling; Crisis intervention counseling; Parent training; Community based mental health services; Substance Abuse Education; Prevention and Diversion Services; Social Skills Training; Vocational and Job Training Services; and Recreational Services.

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 type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input type="checkbox"/> Improve quality of education		
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)		
<input type="checkbox"/> Improve transportation conditions		
<input type="checkbox"/> Increase or improve economic activity		
<input type="checkbox"/> Increase tourism		
<input checked="" type="checkbox"/> Create specific immediate job opportunities	By hiring additional full-time and part-time mental health counselors, WCDC will be able to effectively address and evaluate at-risk youth in high-crime areas of Duval County.	Mental Health Counselors will evaluate and report information to the Dept of Juvenile Justice as an effort to combat future crime from at-risk youth in Duval County.
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		

<input type="checkbox"/> Reduce recidivism		
<input checked="" type="checkbox"/> Reduce substance abuse	The Executive Director, Program Manager and Mental Health Counselors will focus on reducing and eliminating the use of illegal drugs by at-risk youth in Duval County.	Wayman Community Development staff will report and develop techniques with the Dept of Juvenile Justice to reduce substance abuse use by at-risk youth.
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	Wayman Community Development Corporation program will focus on reducing the number of children charged and entering the juvenile justice system by expanding services.	Working with the Duval County Sheriff's office, Dept of Juvenile Justice and other crime prevention organizations to implement diversion programs to at-risk youth.
<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):		

19. Provide the total cost of the project for FY 2018-19 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:	150,000	54.5%	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:	0	0.0%	No
5. Other:	125,000	45.5%	Yes
<b>TOTAL</b>	<b>275,000</b>	<b>100%</b>	

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

No