

# Appropriations Project Request - Fiscal Year 2018-19

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: The WOW Center - Education, Internships and Training for Future Workforce Success for Adults with Intellectual and Developmental Disabilities

2. Date of Submission: 11/09/2017

3. House Member Sponsor: Daniel Perez

Members Copied:

### 4. DETAILS OF AMOUNT REQUESTED:

- 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***
- What is the most recent fiscal year the project was funded? 2017-18
- Were the funds provided in the most recent fiscal year subsequently vetoed? No
- 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:		250,000	250,000		350,000	350,000

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 Education

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.

If deliverables are not met, a % is withheld.

6. Requester:

- a. Name: Anay Abraham
- b. Organization: The WOW Center
- c. Email: anay@wowcentermiami.org
- d. Phone #: (305)279-7999

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

- a. Name: Anay Abraham
- b. Organization: The WOW Center
- c. Email: anay@wowcentermiami.org
- d. Phone #: (305)279-7999

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

- a. Name: None
- b. Firm: None
- c. Email:
- d. Phone #:

9. Organization or Name of entity receiving funds:

- a. Name: The WOW Center
- b. County (County where funds are to be expended): Miami-Dade
- c. Service Area (Counties being served by the service(s) provided with funding): Miami-Dade

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?

The goal is to increase employment for individuals with intellectual and developmental disabilities by creating community partnerships who will be educated, trained and provide internship programs leading to employment.

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 checked="" type="checkbox"/> a. Executive Director/Project Head Salary and Benefits	Program Development, recruitment and Evaluation	15,000
<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	(1) Social Service Coordinator (1) Job Coach Lead (1) Job Coach (2)Program Aide	185,000
<input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other		
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	(1) Unique Abilities League (1) Shake-a-Leg (1) One of a Kind Services	150,000
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
<b>TOTAL</b>		<b>350,000</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?

No

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?

Education, Internships and Trainings for Future Workforce Success for adults with intellectual and developmental disabilities. The goal is for them to be employed after their internship program.

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

Orientation, job coaching throughout the term of the internship, corporate coaching to the Human Resource Managers or to the immediate supervisor to ensure safety, and proper resources are given to the individuals who are participating in the internship program.

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): Adults with Developmental and intellectual disabilities ages 18 - 78.

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 checked="" type="checkbox"/> Improve physical health	Qualitative and quantitative data will be collected during the entire internship. Individuals will have an individual education plan which will address specific benchmarks that the individuals will complete at each quarter. (Ex: Individuals will learn new work skills which are "hands-on" that are only available via internships at actual job sites.)	Narrative Summary will be provided for each individual before, during and after the internship. AIEP: An Adult Individual Education Plan will be utilized to provide the specific benchmarks that are achieved during each quarter of the internship. In addition, a short term instructional objectives will be written for each individual to measure qualitative observations throughout the

		internship.
<input checked="" type="checkbox"/> Improve mental health	Qualitative and quantitative data will be collected during the entire internship. Individuals will have an individual education plan which will address specific benchmarks that the individuals will complete at each quarter. (ex: coping skills, social skills, etc...)	Narrative Summary will be provided for each individual before, during and after the internship. AIEP: An Adult Individual Education Plan will be utilized to provide the specific benchmarks that are achieved during each quarter of the internship. In addition, a short term instructional objectives will be written for each individual to measure qualitative observations throughout the internship.
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	Qualitative and quantitative data will be collected during the entire internship. Individuals will have an individual education plan which will address specific benchmarks that the individuals will complete at each quarter. (Ex: Individuals will learn new work skills which are "hands-on" that are only available via internships at actual job sites.)	Narrative Summary will be provided for each individual before, during and after the internship. AIEP: An Adult Individual Education Plan will be utilized to provide the specific benchmarks that are achieved during each quarter of the internship. In addition, a short term instructional objectives will be written for each individual to measure qualitative observations throughout the internship.
<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 type="checkbox"/> Create specific immediate job opportunities		
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<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:	350,000	100.0%	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:	0	0.0%	No
<b>TOTAL</b>	<b>350,000</b>	<b>100%</b>	

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

No