

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Hernando Career Certificate and Dual Enrollment Expansion
2. Date of Submission: 11/12/2019
3. House Member Sponsor: Ralph Massullo
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? > 5 years
- 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 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: | | | | | 9,800,000 | 9,800,000 |

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 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.
Return of funds in the event that the expansion does not begin.

6. Requester:

- a. Name: John Stratton
- b. Organization: Hernando County School District
- c. Email: Stratton_J@hcsb.k12.fl.us
- d. Phone #: (352)797-7000

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

- a. Name: Sohpia Watson
- b. Organization: Hernando County School District
- c. Email: Watson_s@hcsb.k12.fl.us
- d. Phone #: (352)797-7018

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

- a. Name: Sam Wagoner
- b. Firm: Sunrise Consulting Group
- c. Email: wagoner@scgroup.us
- d. Phone #: (352)584-8647

9. Organization or Name of entity receiving funds:

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

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?

Recognizing the growing need to expand Career Certificate and Dual Enrollment offerings in Hernando County, we propose adding a wing to the Central High School campus. The site will provide immediate space for new programs, but can also accommodate future growth. The approximately 20,000 sq. ft. expansion will serve new students to SunTech, which is anyone who resides, or is willing to commute to, Hernando County.

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 checked="" type="checkbox"/> e. Salaries and Benefits | Start up (first 3 years) salary costs for six (6) new part time Career Certificate Instructors. | 450,000 |
| <input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other | The costs to outfit nine (9) instructional classrooms, six (6) Career Certificate classrooms, two (2) computer labs, one (1) training room, and the front desk area. | 709,000 |
| <input type="checkbox"/> g. Consultants/Contracted Services/Study | | |
| Fixed Capital Construction/Major Renovation: | | |

| | | |
|--|---|-----------|
| <input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering | Using an existing parcel on Central High Schools campus, the total cost of the roughly 22,579 square foot expansion, including site prep, foundation, metal building with standing seam roof, parking, security fencing, drainage, elevator and other architectural design items, would not exceed this amount. | 8,641,000 |
| TOTAL | | 9,800,000 |

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:

The item has been voted on at the local school board meeting on 9/24/19. The board also agreed to put aside money to support the project during their informal board meeting on 9/10/19. There are also letters of support that can be made available upon request.

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 funds would provide for a approximately 22,579 square foot expansion of Central High School, which would allow for increased Career Certificate programs to be offered by the local school district.

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

Citizens of Hernando County will be able to enroll in up to 8 new Career Certificate courses at the new location. The Career Certificate courses would address the regional hiring needs, while maintaining the flexibility to adjust programs as the local needs change.

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 checked="" type="checkbox"/> Improve quality of education | Increase the number of Career Certificate programs offered in Hernando County. | Report of registrations in Career Certificate coursework, and percentage of successful completions. |
| <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 checked="" type="checkbox"/> Increase or improve economic activity | Increase in the quality of local workforce. | Summative data collected from employers during advisory meetings. |
| <input type="checkbox"/> Increase tourism | | |

| | | |
|---|---|--------------------------------|
| <input type="checkbox"/> Create specific immediate job opportunities | | |
| <input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency | Increase in the number of students who become employed or obtain a higher wage. | Collection of employment data. |
| <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 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: | 9,800,000 | 97.5% | 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: | 250,000 | 2.5% | Yes |

| | | | |
|-----------|------------|------|----|
| 5. Other: | 0 | 0.0% | No |
| TOTAL | 10,050,000 | 100% | |

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

No