

# Appropriations Project Request - Fiscal Year 2020-21

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Summer Youth Employment Program
2. Date of Submission: 11/15/2019
3. House Member Sponsor: Chuck Brannan  
Members Copied:

### 4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? No  
*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?
- c. Were the funds provided in the most recent fiscal year subsequently vetoed?
- 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>	<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:					88,500	88,500

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 Economic Opportunity
  - 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.  
remittance of funds.

6. Requester:

- a. Name: Jeff Geering
- b. Organization: Career Source Florida Crown
- c. Email: jgeering@careersourceflcrown.com
- d. Phone #: (386)755-9026

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

- a. Name: Jeff Geering
- b. Organization: Career Source Florida Crown
- c. Email: jgeering@careersourceflcrown.com
- d. Phone #: (386)755-9026

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: Career Source Florida Crown
- b. County (County where funds are to be expended): Columbia
- c. Service Area (Counties being served by the service(s) provided with funding): Columbia

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 program looks to provide job opportunities for youth as well as strengthen the bond between the general public and law enforcement.

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	Board staff salaries and benefits for programs portion of costs includes executive director, finance director, IT and Business Services Director, Accounting Assistant, and Administrative Assistant.	4,908
<input type="checkbox"/> b. Other Salary and Benefits		
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	Administrative overhead costs which include membership, liability insurance, and indirect costs that are required to DEO to help support the cost share of the program.	13,625
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	Includes programmatic salaries and benefits for staff directly involved with the program and help to carry out the day to day operation of the program.	16,450
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Programmatic overhead costs to operate program and cost share one	53,109

	stop operating costs. Includes work experience costs for summer youth to work under the program.	
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	Consulting fees for One Stop Operator program cost share to ensure compliance with all federal, state, and local laws and program regulations.	408
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
<b>TOTAL</b>		<b>88,500</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)

- 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 summer youth program was funded by a DEO special grant for the 2019-2020 year. We had the support of the Lake City Police Department along with the City of Lake City. We also had several businesses within the community help to provide employment for the summer youth program.

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?

To allow work experience to high school youth, economically disadvantaged people, and high risk youth.

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

Find summer employment for the targeted population and allow them to gain necessary skills to perform certain job duties.

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 type="checkbox"/> Create specific immediate job opportunities		
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Participants will be able to earn a paycheck that they can use to purchase supplies and clothes for school or assist with their family with monthly responsibilities.	Paycheck will be issued each week.
<input checked="" type="checkbox"/> Reduce recidivism	At risk participants who may be part of the Juvenile Justice system may be placed in job opportunities provided they meet the qualifications and pass the interview process.	Staff from the Lake City Police and Career Source Florida any concerns that may arise.
<input type="checkbox"/> Reduce substance abuse		
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	Participation who are at risk will receive soft skills training and upon completion be placed in a job opportunity within the county.	Participants completes the program with a certificate of completion and possibly a monetary reward.
<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 checked="" type="checkbox"/> Other (Please describe): job skills	Participants will complete a job application and go through an interview and selection process.	Participants will attend a one week soft skill training.

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:	88,500	63.9%	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:	50,000	36.1%	No
5. Other:	0	0.0%	No
TOTAL	138,500	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