

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Osceola County and City of St. Cloud Innovative Training Center
2. Date of Submission: 11/12/2019
3. House Member Sponsor: Mike La Rosa
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>	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:					3,000,000	3,000,000

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? 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.
Pro-rata clawback of any unused or misappropriated funds

6. Requester:

- a. Name: William Sturgeon
- b. Organization: City of St. Cloud
- c. Email: WSturgeon@stcloud.org
- d. Phone #: (407)957-7301

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

- a. Name: Thomas Ott
- b. Organization: The School District of Osceola County
- c. Email: Thomas.Ott@osceolaschool.net
- d. Phone #: (407)518-4580

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

- a. Name: Chris Carmody
- b. Firm: Gray Robinson
- c. Email: Chris.Carmody@gray-robinson.com
- d. Phone #: (407)843-8880

9. Organization or Name of entity receiving funds:

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

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) Local Government in partnership with the Osceola County School District

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

The City of St Cloud, in cooperation with the Osceola Board of County Commission and Osceola County School Board, proposes to create an innovative, accelerated, responsive and competency-based technical workforce program that meets the manufacturing industry’s skill requirements for welding. The coordinated effort will bring welding training, classrooms and labs to train laborers for high paying jobs. The project will provide well skilled trained labor to a fast growing regional job demand.

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 checked="" type="checkbox"/> b. Other Salary and Benefits	Salaries will be used to hire non-instructional staff.	35,000
<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	Salaries will be used to hire instructional staff.	42,000
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Funds will be used to purchase welding equipment for 30 work stations with positive ventilation system, computers labs for two classrooms, and classroom furniture for 4 classrooms	781,282
<input type="checkbox"/> g. Consultants/Contracted Services/Study		

Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	Funds will be used for capital improvements of existing building to retrofit and update, which will include fully functional welding bay with 30 work booths and four fully functioning classrooms.	2,141,718
TOTAL		3,000,000

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): The building will be owned by local government and leased to the school district.

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:

Letter of Approval from The St. Cloud Greater Osceola Chamber of Commerce, Dirk Webb, President and CEO (407) 892-3671, Letter of Approval from ABC/ Associated Builders and Contractors, Mark P Wylie, President and CEO (407) 398-1272, City of St. Cloud adopted through Resolution 2019-184R on August 22, 2019,

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?

Funds will be used to create welding labs, purchase simulators and create an in-classroom experience at a local technical program level. The welding program will be approximately 1200 clock hours of student time and can be completed in approximately one year. The program will provide training for advanced manufacturing jobs, utilizing state-of-the-art welding equipment, hybrid learning, welding units, simulation technologies and open education resources.

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

This project is a job training initiative in the City of St. Cloud and would provide for an advanced welding educational program. The project will improve job training opportunities for higher paying manufacturing and infrastructure construction jobs for the citizens who reside here, providing workforce viability and workforce development in our region.

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	Students in the Osceola County School District and surrounding counties will benefit with the option to participate in this welding program and gain critical skills for a career in welding and manufacturing.	The number of students in the welding program compared with the number of job placements after completion of program.
<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	The increased number of certified welders in the Osceola County region will increase the opportunity for more affordable, quality construction.	The number of welders placed on construction and manufacturing sites in and around Osceola County.
<input type="checkbox"/> Increase tourism		
<input checked="" type="checkbox"/> Create specific immediate job opportunities	Completion of the welding program will create immediate job opportunities for participants.	The number of job placements for graduates of the welding program.
<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 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:	3,000,000	85.7%	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:	500,000	14.3%	Yes
5. Other:	0	0.0%	No
TOTAL	3,500,000	100%	

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

No