

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Florida Youth Leadership, Mentoring and Character Education Pilot
2. Date of Submission: 11/04/2019
3. House Member Sponsor: Ramon Alexander
Members Copied: Elizabeth Fetterhoff, Wengay Newton

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:					475,000	475,000

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.
Performance penalties may include reduction in program appropriations commensurate with deliverables not met or repayment requirement.

6. Requester:

- a. Name: Linda Dilworth
- b. Organization: Tallahassee Chapter of The Links, Incorporated
- c. Email: LindaDilworth@aol.com
- d. Phone #: (850)508-1794

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

- a. Name: Linda Dilworth
- b. Organization: Tallahassee Chapter of The Links, Incorporated
- c. Email: LindaDilworth@aol.com
- d. Phone #: (850)508-1794

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 Links Foundation, Incorporated
- b. County (County where funds are to be expended): Leon, Pinellas, Volusia
- c. Service Area (Counties being served by the service(s) provided with funding): Leon, Pinellas, Volusia

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 Tallahassee Chapter of The Links, Incorporated is requesting to enhance and replicate its nationally award winning youth leadership development, mentoring and character education program as a statewide pilot program. This curriculum based program promotes leadership and life skills development, character education, cultural awareness and community service while also establishing community based mentors and scholarships for students.

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 checked="" type="checkbox"/> d. Consultants/Contracted Services/Study	6%- Accountant and Program Consultants	28,500
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	50%- Program supplies, materials, travel, printing and statewide collaboration	237,500
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	44%- Contracted Program Services and Events	209,000
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		475,000

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:

Letters of Support from Leon County School Board, Volusia County School Board, Pinellas County School Board, The Links, Incorporated (Tallahassee Chapter, St. Petersburg Chapter and Daytona Beach Chapter)

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?

Curriculum life skills instruction sessions, educational and cultural site visits and tours, mentoring sessions and scholarships/program awards.

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

Educational and life skills instruction and mentoring support for youth.

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 checked="" type="checkbox"/> Improve physical health	100% of student participants will be exposed to childhood obesity prevention and healthy lifestyles curriculum instruction; 100% of student participants will engage in physical movement and exercise at each program session	Attendance rosters; Student Evaluative Surveys; Parent Evaluative Surveys
<input checked="" type="checkbox"/> Improve mental health	100% of student participants will be exposed to a life skills curriculum session	Attendance rosters; Student Evaluative Surveys; Parent Evaluative Surveys
<input checked="" type="checkbox"/> Enrich cultural experience	100% of student participants will engage cultural presentation sessions, tours and involvement	Attendance rosters; Student Evaluative Surveys; Parent Evaluative Surveys
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	100% of student participants will attend high quality leadership and life skills development, cultural and character education curriculum sessions; 100% of student participants will be exposed to the value and benefits of education	Attendance rosters; Student Evaluative Surveys; Parent Evaluative Surveys
<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	100% of student participants will be exposed to measures of educational impact on quality of life through curriculum sessions and activities	Attendance rosters; Student Evaluative Surveys; Parent Evaluative Surveys
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	100% of student participants will be exposed to a legal rights and responsibilities curriculum session; 100% of student participants will be coached and encouraged regarding high school graduation, postsecondary educational studies, professional goals and lifelong learning 100% of student participants will be provided community mentors	Attendance rosters; Student Evaluative Surveys; Parent Evaluative Surveys; Longitudinal Program Follow-up and Data
<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?
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1. Amount Requested from the State in this Appropriations Project Request:	475,000	92.2%	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:	40,000	7.8%	No
TOTAL	515,000	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