

# Appropriations Project Request - Fiscal Year 2020-21

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: SHE Academy Inc.
2. Date of Submission: 11/11/2019
3. House Member Sponsor: Ramon Alexander  
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:					150,000	150,000

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.  
Reimbursement of funds/loss of funding as outlined by the Department.

6. Requester:

- a. Name: Cherralyn Romer
- b. Organization: SHE ACADEMY, INC.
- c. Email: sheacademyinc@gmail.com
- d. Phone #: (786)525-7228

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

- a. Name: Cherralyn Romer
- b. Organization: SHE ACADEMY, INC.
- c. Email: sheacademyinc@gmail.com
- d. Phone #: (786)525-7228

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: SHE ACADEMY, INC.
- b. County (County where funds are to be expended): Leon
- c. Service Area (Counties being served by the service(s) provided with funding): Leon

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) Mentoring Non Profit, 501c3 status pending

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

The funds will help supply students with the tools and information in a safe, calm and comfortable environment which will help reduce students stress stemming from the lack of resources at home and outside of school hours.

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	20% for Executive Director to organize strategic planning, business development, provide service and coordination, recruit and train volunteers, and collaborative to maximize services in the Tallahassee area.	30,000
<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 type="checkbox"/> e. Salaries and Benefits		
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	• Laptops , computers, and printers \$5,500 • Supplies and Mailings \$4,500 • Educational and Marketing Supplies \$7,500 • ADA Compliant van and mileage to homes and educational sites \$6,500 • Office Phones, Internet, and Security	93,850

	Surveillance \$3,000 • Social involvement supplies \$850 • Property expenses, building services, and utilities \$56,000 • Uniform \$10,000	
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	17.4% for OPS staff members to provide direct services and coordination for members and participants, to recruit and train volunteers, and collaborate to maximize services in the Tallahassee area.	26,150
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
<b>TOTAL</b>		<b>150,000</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)

- 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:

Leon County Delegation Hearing, letter of support from community members, school officials, and supporting organizations.

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?

We will provide services and offer counseling specific to each participant's needs. These services will include support groups on common issues faced by teenage girls, physical and mental health seminars, and financial literacy courses to increase awareness, prevention, and healing.

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

Community members and participants will engage in physical education courses, attend health seminars, discussions, cultural tours, and academic conferencing to encourage improvement, awareness, and prevention.

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	Participants will attend physical education courses and attend health seminars to increase awareness, prevention, and healing.	Recorded events published to website, attendance rosters, student evaluative surveys, and parent evaluative surveys.
<input checked="" type="checkbox"/> Improve mental health	Participants and community members will attend mental health seminars and discussions to increase awareness and healing.	Recorded events published to website, attendance rosters, student evaluative surveys, and parent evaluative surveys
<input checked="" type="checkbox"/> Enrich cultural experience	Participants will engage in cultural tours, presentation sessions, and community service events to increase knowledge and awareness.	Recorded events published to website, attendance rosters, student evaluative surveys, and parent evaluative surveys.
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	Participants will be connected with specialists and professionals in the	Recorded events published to website, attendance rosters, student

	fields of Math, English, Science, Language Arts, Agriculture, Arts, Business, and Marketing to improve the quality of education.	evaluative surveys, and parent evaluative surveys.
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Participants will be involved in improving life skills to promote their knowledge and experiences amongst friends and family to encourage community engagement.	Recorded events published to website, attendance rosters, student evaluative surveys, and parent evaluative surveys.
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Participants will use knowledge obtained at financial literacy courses to improve all economic activity for personal use, friends and family.	Recorded events published to website, attendance rosters, student evaluative surveys, and parent evaluative surveys.
<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 checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	Participants will be involved in improving life skills to promote their knowledge and experiences amongst friends and family to encourage community engagement	Recorded events published to website, attendance rosters, student evaluative surveys, and parent evaluative surveys.

<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:	150,000	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>150,000</b>	<b>100%</b>	

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