

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Bollettieri Tennis and Learning
2. Date of Submission: 11/15/2019
3. House Member Sponsor: Will Robinson
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:					374,308	374,308

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.
We would suggest that if the goals and deliverables for the programs are not being met, the funding for the program is terminated.

6. Requester:

- a. Name: Nick Bollettieri
- b. Organization: Bollettieri Tennis and Learning
- c. Email: nbollettieritennis@gmail.com
- d. Phone #: (941)201-8033

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

- a. Name: Steve Shulla
- b. Organization: Bollettieri Tennis and Learning
- c. Email: steveshulla@gmail.com
- d. Phone #: (941)962-7836

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: Bollettieri Tennis and Learning
- b. County (County where funds are to be expended): Statewide
- c. Service Area (Counties being served by the service(s) provided with funding): Statewide

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) Florida Non Profit Corp which has applied for 501(c)(3) stauts

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

Nick Bollettieri and his team of experts have founded Bollettieri Tennis and Learning to provide free tennis instruction; fitness training; academic tutoring; mental conditioning; nutritional programming; life skills training; socialization training and conflict resolution training, college advising services, and college scholarship assistance for poor children in Title I schools. We use tennis as the hook to get kids to dream big and give them the skills to make those dreams come true.

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	President and CEO for overall management of the project	24,750
<input checked="" type="checkbox"/> b. Other Salary and Benefits	Tennis Director, Fitness Director, College Advising Manager, Life Skills Manager, Nutritional Manager, and Clinical Psychologist for the program design, training, and management of their elements of the program at each of the five schools	74,250
<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	Support staff	234,000
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Traveling/supplies for training and mentoring	41,308
<input type="checkbox"/> g. Consultants/Contracted Services/Study		

Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		374,308

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?

No

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 activities and services that will be provided to meet the intended purpose of the funds are Bollettieri tennis instruction; fitness training; academic tutoring and life skills coaching; nutritional programming; socialization, conflict resolution, and problem solving skills training; mentoring; college advising services, and college scholarship assistance. Our holistic approach to working with children is what separates our programs from others.

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

The direct services that will be provided to citizens are Bollettieri tennis instruction; fitness training; academic tutoring and life skills coaching; nutritional programming; socialization, conflict resolution, and problem solving skills training; mentoring; college advising services, and college scholarship assistance. The tennis, fitness, academic tutoring, life skills training, and mentoring will be provided after school, Monday through Thursday from about 3:30-5:30 at the school. The nutri

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): Title 1 Schools

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	Our program includes fitness training, tennis lessons, and nutrition education, all administered by experienced professionals.	We will measure improvement in physical health by improved performance in fitness and tennis tests such as how quickly a student can run laps and number of balls returned and quality of strokes.
<input checked="" type="checkbox"/> Improve mental health	A key part of our program is students spending time with a mental health professional one on one time as needed.	Improved mental health and wellness will be measured by an increase in happiness and a decrease in behavior requiring disciplinary responses.
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	We will be providing tutoring services and time in a classroom for all students enrolled in our program.	Our tutoring staff works with teachers at the school every week to measure the academic results and design tutoring programs to improve any deficiencies in order for the students to meet or exceed a 3.0 GPA.
<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 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 checked="" type="checkbox"/> Other (Please describe): Life Skills	Life Skills classes covering topics like the importance of teamwork, positivity, and grit.	Success in this area will be measured in weekly review sessions, an ability to discuss the topics covered, and applying the principals covered in their lives.

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:	374,308	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
TOTAL	374,308	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