Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Youth Empowerment After School & Summer Camp

2. Date of Submission: 11/13/2017

3. House Member Sponsor: Cynthia Stafford

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 2017-18 (If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2018-19 (Requests for additional RECURRING funds are prohibited.)		
Column:	Α	В	С	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: column A + column B)	Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds (Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)
Input Amounts:					250,000	250,000

- 5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2018-19? 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.

First receive technical assistance, and if agency continues to not to meet expectations, the contract may not renewed.

6. Requester: a. Name: Saliha Nelson b. Organization: Urgent, Inc. c. Email: saliha@urgentinc.org d. Phone #: (786)581-7821
 7. Contact for questions about specific technical or financial details about the project: a. Name: Saliha Nelson b. Organization: Urgent, Inc. c. Email: saliha@urgentinc.org d. Phone #: (786)581-7821
 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: <u>Urgent, Inc.</u> b. County (County where funds are to be expended): <u>Miami-Dade</u> c. Service Area (Counties being served by the service(s) provided with funding): <u>Miami-Dade</u>
 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 goal of the Youth Empowerment Program is to provide 125 elementary and middle school students an affordable after school and summer camp option for families from Targeted Urban Areas (TUA) within the City of Miami (Overtown) amd Miami Dade County withing the census tracts with 51%LMI. Quality after school and summer camp programming enables low income families to remain in the workforce and provides students with educational risks to improve their reading literacy, fitness and social skills.

12. Provide specific details on how funds will be spent. (Select all that apply)

Trovide specific details of flow fullus will be sperit. (Select al		
Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter ?0? if request is zero for the category
Administrative Costs:		
☑a. Executive Director/Project Head Salary and Benefits	Project Director	23,325
☑b. Other Salary and Benefits	Finance Manager Operations Manager	21,675
☑c. Expense/Equipment/Travel/Supplies/Other	Facility Maintenance Insurance Audit	5,000
□d. Consultants/Contracted Services/Study		
Operational Costs:		
☑e. Salaries and Benefits	Associate School Age Out of School Time Director Site Coordinators (2) After School Counselors (5) Summer Camp Counselors (5) Certified Teachers (2) Enrichment Instructors (5)	180,384
☑f. Expenses/Equipment/Travel/Supplies/Other	Materials & Supplies Staff Travel Non Capital Equipment Participant Meals Participant Travel- After School Participant Travel- Summer Utilities	17,616

	Field Trips Background Screenings	
☑g. Consultants/Contracted Services/Study	Program Evaluation	2,000
Fixed Capital Construction/Major Renovation:		
□h. Construction/Renovation/Land/Planning Engineering		
TOTAL		250,000

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)

N/A

14. Is the project request an information technology project?

<u>No</u>

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 Children's Trust

- 16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served? Yes
 - 16a. Please Describe:

The Children's Trust

17. Will the requested funds be used directly for services to citizens?

<u>Yes</u>

- 17a. What are the activities and services that will be provided to meet the purpose of the funds?

 After School and Summer Camp Services- Reading Literacy, Fitness Promotion, Social Skills, Enrichment
- 17b. Describe the direct services to be provided to the citizens by the funding requested.

The program will serve 125 between the ages of 5-13 annually, 75 during the school year and 50 during the summer. 70% qualify for free or reduced lunch. Core activities include reading literacy, homework help, physical fitness, social skills, community service, performing and visual arts.

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?
O< 25
O25-50
O51-100
⊙ 101-200
O201-400
O401-800
O>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
□Improve physical health		
□Improve mental health		
□Enrich cultural experience		
□Improve agricultural production/promotion/education		
☑Improve quality of education	1) Improvement of Oral Reading Fluency for students in grades K-3 2) Improvement of Reading Comprehension in grades 4-6.	Pre/Post Oral Reading Fluency 2) Pre/Post Reading Comprehension
□Enhance/preserve/improve environmental or fish and wildlife quality		
□Protect the general public from harm (environmental, criminal, etc.)		
□Improve transportation conditions		
□Increase or improve economic activity		
□Increase tourism		
□Create specific immediate job opportunities		
□Enhance specific individual?s economic self sufficiency		
□Reduce recidivism		
□Reduce substance abuse		
□Divert from Criminal/Juvenile justice system		

□Improve wastewater management	
□Improve stormwater management	
□Improve groundwater quality	
□Improve drinking water quality	
□Improve surface water quality	
□Other (Please describe):	

19. Provide the total cost of the project for FY 2018-19 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?
Amount Requested from the State in this Appropriations Project Request:	250,000	100.0%	N/A
2. Federal:	0	0.0%	No
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	250,000	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 2018-19 over the next 5 years?

⊙<1M

O1-3M

O>3-10M

20b. How many additional years	of state support do you expect to need for this project?
O1 year	
⊙ 2 years	
O3 years	
O4 years	
O>= 5 years	
	st for all years including all federal, local, state, and any other funds? Select the single answer which best If funds requested are for ongoing services or for recurring activities, select ?ongoing activity?.
Oongoing activity? no total cos	
⊙<1M	
O1-3M	
O>3-10M	
O>10M	

O>10M