# Appropriations Project Request  - Fiscal Year 2018-19

**For projects meeting the Definition of House Rule 5.14**

1. Title of Project: <u>Manufacturing Talent Asset Pipeline (TAP)</u>
2. Date of Submission: <u>11/14/2017</u>
3. House Member Sponsor: <u>Tom Goodson</u>
   Members Copied:

**4. DETAILS OF AMOUNT  REQUESTED:**

   a.  Has funding been provided in a previous state budget for this activity?     <u>Yes</u>

       *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?  <u>2017-18</u>

   c.  Were the funds provided in the most recent fiscal year subsequently vetoed?  <u>No</u>

   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: | A | B | C | 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: | | 400,000 | 400,000 | | 520,000 | 520,000 |

5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2018-19? <u>No</u>

    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 Economic Opportunity

    5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? <u>No</u>

    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.

    The appropiation would be a cost reimbursement grant in which the penalty for non performance would be no payment.

6. Requester:
    a. Name: <u>Lynda Weatherman</u>
    b. Organization: <u>Economic Development Commission of Florida's Space Coast</u>
    c. Email: <u>LWeatherman@SpaceCoastEDC.org</u>
    d. Phone #: <u>(321)638-2000</u>


7. Contact for questions about specific technical or financial details about the project:
    a. Name: <u>Lynda Weatherman</u>
    b. Organization: <u>Economic Development Commission of Florida's Space Coast</u>
    c. Email: <u>LWeatherman@SpaceCoastEDC.org</u>
    d. Phone #: <u>(321)638-2000</u>


8. Is there a registered lobbyist working to secure funding for this project?
    a. Name: <u>Barney Bishop</u>
    b. Firm: <u>Barney Bishop Consulting, LLC</u>
    c. Email: <u>barney@barneybishop.com</u>
    d. Phone #: <u>(850)907-3436</u>


9. Organization or Name of entity receiving funds:
    a. Name: <u>Economic Development Commission of Florida's Space Coast</u>
    b. County (County where funds are to be expended): <u>Brevard</u>
    c. Service Area (Counties being served by the service(s) provided with funding): <u>Brevard</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) <u>Not-for-profit 501(c)6</u>

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

The Economic Development Commission of Florida?s Space Coast?s Talent Asset Pipeline (TAP) initiative addresses critical manufacturing talent issues by focusing on:
1. Training & Career Placement to build skills applicable to all manufacturing sectors and to fill critical voids in the workforce pipeline;2. Image and Attraction Campaign to drive interest in manufacturing career paths;3. Talent Recruitment Campaign to meet current / future talent demands of the technology centric Brevard region.

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: | | |
| ☐a. Executive Director/Project Head Salary and Benefits | | |
| ☐b. Other Salary and Benefits | | |
| ☐c. Expense/Equipment/Travel/Supplies/Other | | |
| ☐d. Consultants/Contracted Services/Study | | |
| Operational Costs: | | |
| ☑e. Salaries and Benefits | Administer current scholarship program,Web Site Maintenance/Management/Enhancements, High School Workforce Readiness Campaign,add additional industry certifications in-line with CPT skills | 112,000 |
| ☑f. Expenses/Equipment/Travel/Supplies/Other | Image and Attraction Campaign, Talent Recruitment Campaign. Follow-on industry certifications, Mentorship & work readiness training, | 330,000 |

| | Career exposure and work experience, High School Workforce Readiness Campaign. 90 CPT student enrollment. | |
|---|---|---|
| ☑g.  Consultants/Contracted Services/Study | Promote Manufacturing Awareness and CPT Training in region - Industry Expert consultant | 78,000 |
| Fixed Capital Construction/Major Renovation: | | |
| ☐h.  Construction/Renovation/Land/Planning Engineering | | |
| TOTAL | | 520,000 |

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?
     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:
      Manufacturers Association of Florida's Space Coast (MASC) 60 manufacturing members endorse, letter of support 1/2017. City of Titusville 8/23/2016 ; City of Palm Bay 12/15/2016, each allocated dedicated funding to match training funds within respective cities. Civic organizations: Zonta, Women in Defense, Pastor's Community Alliance, Junior Achievement, SCHRA, Brevard Achievement Center have endorsed and provided letters.

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?
Image and attraction campaign to community. Manufacturing training for citizens.

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

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): veterans

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 |
|---|---|---|
| ☐Improve physical health | | |
| ☐Improve mental health | | |
| ☐Enrich cultural experience | | |
| ☐Improve agricultural production/promotion/education | | |
| ☑Improve quality of education | Training 90 (minimum) adult individuals with manufacturing certification (CPT); work readiness (soft skill) training, and career exposure including mentorship. Also, training 200 high school students with manufacturing awareness and soft skill curriculum. | 75% graduation and job placement for adults; 90% course completion for high school students and 90% job shadow. |
| ☐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 | Meet manufacturing employment needs - train 90 (minimum) adult individuals for direct hire in response to employer needs | 75% job placement rate for trainees |

| | | |
|---|---|---|
| ☐Increase tourism | | |
| ☑Create specific immediate job opportunities | Training 90 (minimum) adult individuals to fill open manufacturing jobs | 75% job placement rate for trainees |
| ☑Enhance specific individual?s economic self sufficiency | Training 90 (minimum) adult individuals with manufacturing certification (CPT); work readiness (soft skill) training, and career exposure including mentorship. Also, training 200 high school students with manufacturing awareness and soft skill curriculum. | 75% graduation and job placement for adults; 90% course completion for high school students and 90% job shadow. |
| ☐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? |
|---|---|---|---|
| | | | |

APR #: 1223

| | | | |
|---|---|---|---|
| 1. Amount Requested from the State in this Appropriations Project Request: | 520,000 | 80.0% | 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: | 130,000 | 20.0% | Yes |
| TOTAL | 650,000 | 100% | |

20. Is this a multi-year project requiring funding from the state for more than one year?
    No