Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Hope Street Family Education Services
2. Date of Submission: 11/15/2019
3. House Member Sponsor: James Grant
    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 (If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2020-21 (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:					500,000	500,000

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.
    Repayment of funds

6. Requester:
    a. Name: <u>Jerry T. Haag, Ph.D., CFP, CEO</u>
    b. Organization: <u>One More Child, Inc.</u>
    c. Email: <u>Jerry.Haag@onemorechild.org</u>
    d. Phone #: <u>(863)687-8811</u>

7. Contact for questions about specific technical or financial details about the project:
    a. Name: <u>Pam Whitaker, Ed.D., LMHC</u>
    b. Organization: <u>One More Child, Inc.</u>
    c. Email: <u>pam.whitaker@onemorechild.org</u>
    d. Phone #: <u>(863)687-8811</u>

8. Is there a registered lobbyist working to secure funding for this project?
    a. Name: <u>Jon Johnson</u>
    b. Firm: <u>Johnson & Blanton</u>
    c. Email: <u>jon@teamjb.com</u>
    d. Phone #: <u>(850)224-1900</u>

9. Organization or Name of entity receiving funds:
    a. Name: <u>One More Child, Inc.</u>
    b. County (County where funds are to be expended): <u>Duval, Hillsborough, Polk</u>
    c. Service Area (Counties being served by the service(s) provided with funding): <u>Duval, Hillsborough, Polk</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?

Expand educational component of Hope Street Family Education Services to provide vocational assistance and education, counseling and guidance to gain self knowledge regarding abilities and aptitudes for future career options to youth of the program to promote successful future economic sustainability as well as mobility as adults.

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	Salary and benefits for 1 Executive Director	44,530
☐b. Other Salary and Benefits		
☑c. Expense/Equipment/Travel/Supplies/Other	Expenses, travel and supplies related to the administration of the program	12,490
☐d. Consultants/Contracted Services/Study		
Operational Costs:		
☑e. Salaries and Benefits	Salaries and benefits for educational staff	105,129
☑f. Expenses/Equipment/Travel/Supplies/Other	Educational equipment, supplies, expenses, travel related to vocational assistance and education of individuals served by the program	337,851
☐g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		

☐h. Construction/Renovation/Land/Planning Engineering		
TOTAL		500,000

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?

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?

After-school programming, tutoring, literacy programs, summer day camps, academic enrichment, parenting education (child development and teaching of social and emotional regulation), building resiliency, and parent support groups

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

After-school programming, tutoring, literacy programs, summer day camps, academic enrichment, parenting education (child development and teaching of social and emotional regulation), building resiliency, and parent support groups

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): At risk families and struggling families with children/youth.

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		
☐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		

APR #: 1704

☐Improve surface water quality		
☑Other (Please describe): Struggling and at risk families	Parents will report increased knowledge of parenting skill/child development, increased social connections, increased knowledge of concrete supports, increased resiliency after six months of services.	Protective Factors Survey Quality f Life Inventory

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:	500,000	90.9%	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:	50,000	9.1%	Yes
TOTAL	550,000	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

APR #: 1704

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