# **Appropriations Project Request - Fiscal Year 2020-21**

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Hillsborough Community College - Supply Chain Management and Logistics Program, Phase I

2. Date of Submission: <u>11/15/2019</u>

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:               | Α  | В                                   | С  | D  | E                               | F  |
| Funds<br>Description: | Prior Year<br>Recurring<br>Funds   | Prior Year<br>Nonrecurring<br>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<br>Amounts:     |  |                                     |  |  | 2,000,000                       | 2,000,000  |

- 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 Economic Opportunity
  - 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.

**Reversal of Funding** 

| 6. Requester: a. Name: Ken Atwater b. Organization: Hillsborough Community College c. Email: katwater@hccfl.edu d. Phone #: (813)253-7560  |
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| <ul> <li>7. Contact for questions about specific technical or financial details about the project: <ul> <li>a. Name: <u>Ken Atwater</u></li> <li>b. Organization: <u>Hillsborough Community College</u></li> <li>c. Email: <u>katwater@hccfl.edu</u></li> <li>d. Phone #: (813)253-7560</li> </ul> </li> </ul>               |
| 8. Is there a registered lobbyist working to secure funding for this project?  a. Name: <u>LAura Boehmer</u> b. Firm: <u>The Southern Group</u> c. Email: <u>boehmer@thesoutherngroupcom</u> d. Phone #: (813)563-4100   |
| <ul> <li>9. Organization or Name of entity receiving funds:</li> <li>a. Name: <u>Hillsborough Community College</u></li> <li>b. County (County where funds are to be expended): <u>Hillsborough</u></li> <li>c. Service Area (Counties being served by the service(s) provided with funding): <u>Hillsborough</u></li> </ul> |
| <ul> <li>10. What type of organization is the entity that will receive the funds? (Select one)</li> <li>O For Profit</li> <li>O Non Profit 501(c) (3)</li> <li>O Non Profit 501(c) (4)</li> <li>O Local Government</li> <li>O University or College</li> <li>O Other (Please describe)</li> </ul>                            |

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

Funding will be used to support the college's Supply Chain Management and Logistics Programs. HCC will offer career pathways in two highly interconnected areas, Industrial Machinery Mechanics and Logistics. These pathways lead to a seamless transition from entry-level certifications up to a comprehensive Associate of Science (AS) Degree in Supply Chain Management or Engineering Technology. The program targets underemployed, unemployed, transitioning veterans, high school and college students.

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

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|---|---|--|
| Spending Category                                       | Description   | Nonrecurring<br>(Should equal 4d, Col. E) Enter "0" if<br>request is zero for the category |
| Administrative Costs:                                   |   |  |
| ☑a. Executive Director/Project Head Salary and Benefits | Project Management  | 66,036   |
| □b. Other Salary and Benefits                           |   |  |
| ☑c. Expense/Equipment/Travel/Supplies/Other             | Travel, promotional materials and supplies  | 15,200   |
| □d. Consultants/Contracted Services/Study               |   |  |
| Operational Costs:                                      |   |  |
| ☐e. Salaries and Benefits                               |   |  |
| ☑f. Expenses/Equipment/Travel/Supplies/Other            | Industry recommended equipment for training technicians in the area of advance warehousing operations and maintenance, furniture, computer equipment, tools. Retrofit of current equipment material and spaces. | 1,717,364  |
| ☑g. Consultants/Contracted Services/Study               | Contracted training costs, certification costs, instructor training and certification, consumables, training  | 201,400  |

|   | materials, curriculum access. |           |
|---|-------------------------------|-----------|
| Fixed Capital Construction/Major Renovation:          |                               |           |
| □h. Construction/Renovation/Land/Planning Engineering |                               |           |
| TOTAL   |                               | 2,000,000 |

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)

**OFor Profit** 

ONon Profit 501(c) (3)

ONon Profit 501(c) (4)

OLocal Government (e.g., police, fire or local government buildings, local roads, etc.)

OState agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)

OOther (Please describe)

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?

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? Yes
  - 16a. Please Describe:

Florida Chamber's 2030 plan, (https://www.flchamber.com/wp-content/uploads/2018/09/ES\_FLChamber2030\_TargetsandStrategies\_Sep12.pdf)Hillsborough-Pinellas Manufacturing Gap Analysis (http://tampabaygapanalysis.com/manufacturing.html)

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?

This supporting project will expand the capabilities of current programs to serve Hillsborough County's Logistics and Manufacturing companies by providing state of the art, hands classroom spaces, and the equipment needed to support today's distribution centers. It will also provide training and certification for 234 residents per year for a total of expected certifications of 292 per year, not counting the number of graduates of HCC's for credit programs.

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

Career training in Industrial Machinery Mechanics and Logistics pathways. These pathways lead to a seamless transition from entry-level certifications up to a comprehensive Associate of Science (AS) Degree in Supply Chain Management or Engineering Technology.

| 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?   |
| O< 25   |

| O25-50   |
|----------|
| O51-100  |
| O101-200 |
| O201-400 |
| O401-800 |
| ⊙>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   | This project will allow the offering of industry requested short term certifications that support logistics operations in the state. it will also allow expanded offering by adding technology not available in Hillsborough County today. | Number of participants attaining a certification or credential. |
| □Enhance/preserve/improve environmental or fish and wildlife quality  |  |   |
| □Protect the general public from harm (environmental, criminal, etc.) |  |   |
| ☑Improve transportation conditions                                    | Project will allow the offering of industry requested short term certifications that support logistics operations in the state helping improve transportation of goods   | Number of participants attaining a certification or credential. |

|  | throughout the region and state.   |  |
|--|--|--|
| □Increase or improve economic activity                   |  |  |
| □Increase tourism  |  |  |
| ☑Create specific immediate job opportunities             | Completers of certificate and degree programs are immediately ready to fill needed positions at regional and state employers.  | Number of new positions obtained.  Number of participants attaining a certification or credential. |
| ☑Enhance specific individual's economic self sufficiency | The certificate and degree pathways allow for constant educational attainment to an Associate of Science and transfer to a University. High wage positions are also available after completion of certificates or degree program. The programs offered will also offer upskilling and soft skills improvement for currently employed participants. | Number of participants offered a promotion or attaining new positions.                             |
| □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 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? |
|---|-----------|------------------|---|
| Amount Requested from the State in this Appropriations     Project Request: | 2,000,000 | 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  |
| TOTAL   | 2,000,000 | 100%             |   |

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