

# Appropriations Project Request - Fiscal Year 2020-21

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: North Florida College - Manufacturing Center
2. Date of Submission: 11/01/2019
3. House Member Sponsor: Jason Shoaf  
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<br>for FY 2019-20<br><i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i> |                               |   | Develop New Funds Request<br>for FY 2020-21<br><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<br><br><i>(Recurring plus Nonrecurring: column A + column B)</i> | Recurring Base Budget<br><br><i>(Will equal non-vetoed amounts provided in Column A)</i>                        | <b>Additional Nonrecurring Request</b> | <b>TOTAL Nonrecurring plus Recurring Base Funds</b><br><br><i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i> |
| Input Amounts:     |   |                               |   |   | 13,436,065                             | 13,436,065  |

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.  
n/a

6. Requester:

- a. Name: John Grosskopf
- b. Organization: North Florida College
- c. Email: barnesa@nfcc.edu
- d. Phone #: (850)973-2288

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

- a. Name: Andrew Barnes
- b. Organization: North Florida College
- c. Email: barnesa@nfcc.edu
- d. Phone #: (850)973-1604

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: Lisa Henning
- b. Firm: Timmins Consulting
- c. Email: Lisa@timminsconsulting.com
- d. Phone #: (850)766-8808

9. Organization or Name of entity receiving funds:

- a. Name: North Florida College
- b. County (County where funds are to be expended): Madison
- c. Service Area (Counties being served by the service(s) provided with funding): Hamilton, Jefferson, Lafayette, Suwannee, Taylor

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?

North Florida needs to expand manufacturing training initially started under a federal TAAACT grant that was awarded in 2013. The request includes a remodel and addition to our current Career and Technical Center to accommodate the large machinery and equipment used for training purposes.

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

| Spending Category  | Description  | Nonrecurring<br>(Should equal 4d, Col. E) Enter "0" if<br>request is zero for the category |
|--|--|--|
| Administrative Costs:  |  |  |
| <input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits          |  |  |
| <input type="checkbox"/> b. Other Salary and Benefits                                    |  |  |
| <input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other                      |  |  |
| <input type="checkbox"/> d. Consultants/Contracted Services/Study                        |  |  |
| Operational Costs:   |  |  |
| <input type="checkbox"/> e. Salaries and Benefits  |  |  |
| <input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other                     |  |  |
| <input type="checkbox"/> g. Consultants/Contracted Services/Study                        |  |  |
| Fixed Capital Construction/Major Renovation:   |  |  |
| <input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering | Renovation/ Remodel and 12,000 addition to the existing Career Technical Building #13 on campus needed to house an expansion of manufacturing programs | 13,436,065   |
| <b>TOTAL</b>   |  | <b>13,436,065</b>  |

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?

Yes

15a. Please Describe:

Advanced Manufacturing Advisory Council has continuously expressed a need in the 6 county area that skilled workers are needed in the area. Letters of support have been obtained from area manufacturers.

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:

A manufacturing study by Florida Makes is available and has recommendations of what is needed to support and enhance manufacturing efforts in the region.

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?

Multitude of training opportunities ranging from industrial machinery maintenance to logistics.

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

Multitude of training opportunities ranging from industrial machinery maintenance to logistics.

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?

- < 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 | Describe the method for measuring level |
|--------------------|---|---|
|--------------------|---|---|

|   | or outcome   | of benefit  |
|---|--|---|
| <input type="checkbox"/> Improve physical health  |  |   |
| <input type="checkbox"/> Improve mental health  |  |   |
| <input type="checkbox"/> Enrich cultural experience   |  |   |
| <input checked="" type="checkbox"/> Improve agricultural production/promotion/education       | The NFCC Manufacturing center will be designed as a flexible space that will be utilized to meet the training needs of our service district. The expected facility would generate an additional 25 FTE on an annual basis that will be trained in machinery maintenance as well as other areas such as logistics, and advanced.  | Internal data, FETPIP, and DEO data will be used to evaluate job placement as well as entry-average wages will be used to measure the benefit and outcomes.                       |
| <input checked="" type="checkbox"/> Improve quality of education                              | North Florida Community College will have the training space needed to train for positions relevant to the employers or work demands of our service area. The anticipated outcome is to stimulate the economy of our service by providing a skilled workforce needed to recruit employers to our rural area of economic concern. | Analysis of the performance outcomes will be determined by feedback from advisory councils regarding the job preparedness of NFCC Completer' as well as job placement statistics. |
| <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 checked="" type="checkbox"/> Increase or improve economic activity                   | North Florida Community College will have the training space needed to train for positions relevant to the employers or work demands of our service area. The anticipated outcome is to stimulate the economy of our service by providing a skilled workforce needed to recruit employers to our rural area of economic concern. | Analysis of the performance outcomes will be determined by feedback from advisory councils regarding the job preparedness of 'NFCC Completer' as well as job placement statistics. |
| <input type="checkbox"/> Increase tourism   |  |  |
| <input type="checkbox"/> Create specific immediate job opportunities                        |  |  |
| <input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency | The NFCC Manufacturing center will be designed as a flexible space that will be utilized to meet the training needs of our service district. The expected facility would generate an additional 25 FTE on an annual basis that will be trained in machinery maintenance as well as other areas such as logistics, and advanced.  | Internal data, FETPIP, and DEO data will be used to evaluate job placement as well as entry-average wages will be used to measure the benefit and outcomes.                        |
| <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 type="checkbox"/> 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? |
|--|-------------------|------------------|---|
| 1. Amount Requested from the State in this Appropriations Project Request: | 13,436,065        | 95.2%            | 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:  | 671,803           | 4.8%             | Yes   |
| 5. Other:  | 0                 | 0.0%             | No  |
| <b>TOTAL</b>   | <b>14,107,868</b> | <b>100%</b>      |   |

20. Is this a multi-year project requiring funding from the state for more than one year?

No