

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: University of Central Florida - Community Partnership Schools
2. Date of Submission: 11/14/2017
3. House Member Sponsor: Clay Ingram
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 <i>(If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2018-19 <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 <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget <i>(Will equal non-vetoed amounts provided in Column A)</i>	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:					2,930,570	2,930,570

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2018-19? Yes
 - 5a. If yes, which state agency? Department of Education
 - 5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?
 - 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: Amy Ellis
- b. Organization: UCF Center for Community Schools
- c. Email: amy.ellis@ucf.edu
- d. Phone #: (407)823-2723

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

- a. Name: Amy Ellis
- b. Organization: University of Central Florida
- c. Email: amy.ellis@ucf.edu
- d. Phone #: (407)435-0959

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

- a. Name: Dr. Daniel
- b. Firm: UCF, Children's Home Society of Florida
- c. Email: danh@ucf.edu; summer.pfeiffer@chsfl.org
- d. Phone #: (407)247-9421

9. Organization or Name of entity receiving funds:

- a. Name: University of Central Florida
- b. County (County where funds are to be expended): Orange
- c. Service Area (Counties being served by the service(s) provided with funding): Statewide

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?

To improve school academic performance, student behavior, health and achievement in under performing schools and challenged communities using an evidenced based model

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

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter ?? if request is zero for the category
Administrative Costs:		
<input checked="" type="checkbox"/> a. Executive Director/Project Head Salary and Benefits	Project Lead	105,000
<input checked="" type="checkbox"/> b. Other Salary and Benefits	Admin, Coordinator	152,000
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	In state travel, 1 conference for 2 people, supplies. professional development for statewide directors	62,000
<input checked="" type="checkbox"/> d. Consultants/Contracted Services/Study	Consultants including evaluation of project	89,000
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other		
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	Subcontracts with Community Partnership Schools statewide; to sustain development begun and to expand to new Community Partnership Schools in state	2,522,570
Fixed Capital Construction/Major Renovation:		

<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		2,930,570

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:

Matching grants from Disney, Blue Cross/Blue Shield, JP Morgan Chase, United Way, Orlando Magic, and private donors. There are Memorandum's of Understanding of all funded sites and numerous supportive newspaper articles and recently recognized and awarded by Mutual of America. Each Community Partnership School is required to come up with a 25% local match.

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:

Independent Evaluation by Dr. David Figlio of Northwestern University in January 2016. Recommended gradual expansion and 5 year evaluation based on promising results.

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?

To improve school academic performance, student behavior, health and achievement in underperforming schools and challenged communities using and evidenced-based model.

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

Statewide Community Partnership planning and implementation efforts in which services are provided to youth, their families and the surrounding community on the campus. Services include integrated supports, extended day tutoring, mentoring, enrichment, behavior, health, medical, dental, parent resources and empowerment, other.

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 or outcome	Describe the method for measuring level of benefit
<input checked="" type="checkbox"/> Improve physical health	Increase access to in-schools physical health services	Students enrolled in primary health care, Utilization data and health outcomes
<input checked="" type="checkbox"/> Improve mental health	Increase in number of students accessing mental health services on school campus	Number of students provided mental health counseling in Community Partnership Schools. Behavioral incident tracking.
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	Improve attendance, behavior, academic achievement, and high school graduation rate (in high schools)	Attendance rates, discipline data, school wide academic achievement scores, graduation rates
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Less juvenile delinquency, increase academic performance	Juvenile crimes statistics
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Increase job training for students and assisting parents to find resources	Job placements for graduates
<input type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		

<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<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 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?
1. Amount Requested from the State in this Appropriations Project Request:	2,930,570	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:	733,000	20.0%	Yes
TOTAL	3,663,570	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

1-3M

>3-10M

>10M

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