

The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: Professional Opportunities Programs for Students, Inc.

Senate Sponsor: Randolph Bracy
 Date of Submission: 12/15/2017

4. Project/Program Description:

Professional Opportunities Programs for Students, Inc.

- 5. State Agency Contacted? No
 - a. If yes, which state agency?
 - b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Education
- 6. Amount of Non-recurring Requested for fiscal year 2018-19:

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
500,000		500,000

7. Type, amount and percent of matching funds available for this project for fiscal year 2018-19:

Туре	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	95,505	10.7%
Other	300,000	33.5%
TOTAL	395,505	44.2 %

8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 895,505

9. Previous Year Funding Details:

- a. Has funding been provided in a previous state budget for this activity? No
- b. In the previous 5 fiscal years, how many years was funding provided? (Optional)
- c. What is the most recent fiscal year the project was funded?
- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
- e. Complete the following Worksheet.



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FY:	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	Α	В	С
Funds Description: Input Amounts:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)

10. Is future-year funding likely to be requested?

Yes

a. If yes, indicate non-recurring amount per year.

500,000

11. Program Performance:

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

Mentoring of at-risk High School students, and help them explore careers which may require a college degree or vocational training, enabling them to be self sufficient capable adults. Workforce readiness in the short term, career ready in the long term.

b. What are the activities and services that will be provided to meet the intended purpose of these funds?

The Organization will provide paid summer internships to seventy (70) eleven & twelve grade students for seven weeks during the 2018 summer school break. POPS will provide twenty five (25) ninth & tenth grade students with 6 weeks of technical career exploration and instruction, in a summer camp setting. Funds will also be used to hire staff to manage the summer camp exploration program. Three separate college tours will be provided, each visiting two colleges. One overnight college tour Visiting FAMU and FSU. POPS will provide year-round mentoring and support to 150 plus at-risk students. 8 monthly workshops dealing with specific skill building lectures and interactions, as well as weekly in-school and after school mentoring sessions.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
☑Executive Director/Project Head Salary and Benefits	Exec Dir. Salary + Payroll taxes; Program Manager Salary + payroll taxes	141,528



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☑Other Salary and Benefits	1-Program Manager; 1- Vo- tech Coordinator; 1- Program. Assist.+ taxes & benefits	129,668
☑Expense/Equipment/Travel/Supplies/Other	Bus rentals -college tours, Mileage Reimbursement.; Bus passes (students)	15,994
☑Consultants/Contracted Services/Study	Student stipends for vo-tech exploration(25 students); paid internships (70 students)	154,350
Operational Costs		
☑Salary and Benefits	P/T Bookkeeper	23,500
☑Expense/Equipment/Travel/Supplies/Other	Software and travel	7,509
☑Consultants/Contracted Services/Study	Program evaluator, assessment tools and online services	27,451
Fixed Capital Construction/Major Renovation		
□Construction/Renovation/Land/Planning Engineering		
TOTAL		500,000

d. What are the direct services to be provided to citizens by the appropriations project?

_7 weeks paid summer internships@\$9/hour; stipends (flat rate @ \$100/week) for 7 weeks of vo-tech exploration; college tours to 6 FL colleges, 2-30day bus passes for 70+ students during the summer. Background checks for all students working.

- e. Who is the target population served by this project? How many individuals are expected to be served?

 At risk high school students living in Orange County.
- f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

Students will learn skills through employment; students will have better understanding of vo-technical careers, all students in program will graduate HS on time. All students in program will have a developed plan of what they will do after HS graduation to get to the next goal of self sufficiency.

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- g. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?
 Unspent funds for projects not completed will be returned. i.e. if vo-tech summer enrichment does not occur, funds earmarked for that project will be returned. Students who fail to work the entire allotted time during the summer and do not earn the full amount budgeted these funds will be returned. Or utilized in the following year.
- 12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

 not applicable
- 13. Requestor Contact Information:

a. Name: Judith Mitchell

b. Organization: Professional Opportunities Programs for Students,Inc.

c. Email: Judith.mitchell@popsinc.orgd. Phone Number: (407)843-1202

14. Recipient Contact Information:

a. Organization: Professional Opportunities Programs for Students,Inc.

b. County: Orangec. Organization Type:

O For Profit

● Non Profit 501(c) (3)

O Non Profit 501(c) (4)

O Local Entity

O University or College

O Other (Please specify)

d. Contact Name: Judith Mitchell

e. E-mail Address: Judith.mitchell@popsinc.org

f. Phone Number: (407)843-1202

15. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: None **b. Firm:** None

c. Email:

d. Phone Number: