



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Miami Leadership Institute - The Career Challenge

2. **Senate Sponsor:** Oscar Braynon

3. **Date of Submission:** 01/08/2018

4. **Project/Program Description:**

A seven month Career Challenge targeting young adults between the ages of 18-25, providing them the skills needed to increase employee retention rate, speed up the process for promotion, and increase the interview to hire ratio. The seven month challenge consists of three components: career development, career search and career coaching.

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 Economic Opportunity

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
750,000		750,000

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

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	0	0.0 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 750,000

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?



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- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
 e. Complete the following Worksheet.

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:	A	B	C
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:			

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

Yes

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

750,000

11. Program Performance:

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

Increase employee retention rate, speed up the process for promotion, and increase the interview to hire ratio.

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

Career development and career search. Pre- and post-skills assessment, weekly training session, career assessment, and job interviews. Small business assessment and advising.

- c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input checked="" type="checkbox"/> Executive Director/Project Head Salary and Benefits	Project Head - coordinate, monitor and supervise the activities of the career challenge. Develop program goals and objectives, evaluate program effectiveness, analyze results and research for study	74,000



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	on closing the wage gap.	
<input checked="" type="checkbox"/> Other Salary and Benefits	4 additional trainers to provide skills training, counseling, and identify placement needs and referrals of participants. Responsibilities will include the day to day tracking of participant's progress to ensure success in the career challenge.	175,000
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	4 additional trainers, equipment, and office space used to keep adequate records of program data and trends. Travel to job sites for participant progress and conferences related to job skills development.	27,000
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Staff development and training courses to better serve the diverse population of Miami Dade County.	15,000
Operational Costs		
<input checked="" type="checkbox"/> Salary and Benefits	Training incentive for 150 participants to complete the first 21 days of the Career Challenge – participants will be paid minimum wage for 160 hours of intense training in preparation for stage 2 of the challenge.	218,000
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Update training equipment for an increased number of participants. Computers, test assessment, curriculum, and office stations for job simulation exercises.	143,000



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<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Program Evaluation, and collaboration of new study to compare results to national averages. Experts in selected skill areas will provide training and tips on how to develop key performance traits identified as needed in the various industries.	98,000
Fixed Capital Construction/Major Renovation		
<input type="checkbox"/> Construction/Renovation/Land/Planning Engineering		
TOTAL		750,000

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

Career development and career search. Pre- and post-skills assessment, weekly training session, career assessment, and job interviews. Small business assessment and advising.

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

Young adults ages 18 - 25. 150 individuals expected to be served

f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

Increase the employment rate by training employees on skills required to secure and maintain a job. Prevent otherwise smart individuals from engaging in destructive behavior by identifying their natural skill sets. Track the number of participants hired through the career challenge and revisit the individual for 6 months and making adjustments if necessary.

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?

Refund of any unused funds.

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.

None

13. Requestor Contact Information:

a. Name: Kay Long

b. Organization: Peacemakers Project Miami, Inc



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- c. **Email:** klong@peacemakers.com
- d. **Phone Number:** (786)888-4758

14. Recipient Contact Information:

- a. **Organization:** Peacemakers Project Miami, Inc
- b. **County:** Miami-Dade
- c. **Organization Type:**
 - For Profit
 - Non Profit 501(c) (3)
 - Non Profit 501(c) (4)
 - Local Entity
 - University or College
 - Other (Please specify)
- d. **Contact Name:** Kay Long
- e. **E-mail Address:** klong@peacemakers.com
- f. **Phone Number:** (786)888-4758

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

- a. **Name:** None
- b. **Firm:** None
- c. **Email:**
- d. **Phone Number:**