



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** New College of Florida Multi-Purpose Building for Growth

2. **Senate Sponsor:** Bill Galvano

3. **Date of Submission:** 01/10/2018

4. **Project/Program Description:**

These funds will provide for the planning and design of new, multi-purpose facilities space to support enrollment growth at New College to 1200 students. This project -- the highest priority for New College and a high priority for the State University System -- will provide approximately 107,000 square feet of space to support academic programs (classrooms, labs, auditorium), student development (health and wellness, student life), and administrative support (campus safety, financial affairs).

5. **State Agency Contacted?** Yes

a. If yes, which state agency? Board of Governors

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

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 |
|---------------------------------|---|---------------------------------------|
| | 6,000,000 | 6,000,000 |

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):** 6,000,000

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 | | |
|--------------------|--|---------------------------------|--|
| | A | B | C |
| | (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.

\$10 million for two years

11. Program Performance:

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

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

Preparation of architectural design, engineering, and pre-construction bid documents and permits.

- c. How will the funds be expended?

| Spending Category | Description | Amount |
|--|-------------|--------|
| Administrative Costs | | |
| <input type="checkbox"/> Executive Director/Project Head Salary and Benefits | | |
| <input type="checkbox"/> Other Salary and Benefits | | |
| <input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other | | |



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| | | |
|---|---|-----------|
| <input type="checkbox"/> Consultants/Contracted Services/Study | | |
| Operational Costs | | |
| <input type="checkbox"/> Salary and Benefits | | |
| <input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other | | |
| <input type="checkbox"/> Consultants/Contracted Services/Study | | |
| Fixed Capital Construction/Major Renovation | | |
| <input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering | Preparation of architectural design, engineering, and pre-construction bid documents and permits. | 6,000,000 |
| TOTAL | | 6,000,000 |

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

The new facilities space will allow New College to grow to 1,200 students and reach an 80% four-year graduation rate. This will result in an extra 100 New College graduates per year, providing critical human capital the state needs. The new facilities will provide space for classrooms and labs (direct instruction to students), space to provide health and wellness services, and space for campus safety operations.

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

University Students and Faculty. 1,200 students

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

The new facilities space will allow New College to grow to 1,200 students and reach an 80% four-year graduation rate. This will result in an extra 100 New College graduates per year, providing critical human capital the state needs.

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?

Withholding of state 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.

This is a state government owned facility

13. Requestor Contact Information:

a. Name: Donal O'Shea



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- b. **Organization:** New College of Florida
- c. **Email:** doshea@ncf.edu
- d. **Phone Number:** (941)487-4100

14. Recipient Contact Information:

- a. **Organization:** New College of Florida
- b. **County:** Manatee
- 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:** John Martin
- e. **E-mail Address:** martin@ncf.edu
- f. **Phone Number:** (941)487-4444

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

- a. **Name:** Nick Iarossi
- b. **Firm:** Capital City Consulting
- c. **Email:** niarossi@capcityconsult.com
- d. **Phone Number:** (850)445-7255