



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 1653

**1. Title of Project:** Saint Leo University Wellness Center

**2. Senate Sponsor:** Wilton Simpson

**3. Date of Submission:** 02/07/2019

**4. Project/Program Description:**

Serving as a centerpiece for our contemporary and forward-leaning university, a wellness center will serve as an embodiment of our values in community, responsible stewardship, excellence, and personal development. The intent of the project is to create an environment for holistic health and well-being that integrates student recreation, health services, and counseling and prevention services and provide programs and spaces for community members and their families to enhance their wellness benefiting from both recreational and healthcare close to home.

**5. State Agency to receive requested funds :** Department of Education

State Agency Contacted? No

**6. Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

Type of Funding	Amount
Operations	
Fixed Capital Outlay	1,000,000
<b>Total State Funds Requested</b>	<b>1,000,000</b>

**7. Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	1,000,000	5.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	19,000,000	95.00%
<b>Total Project Costs for Fiscal Year 2019-2020</b>	<b>20,000,000</b>	<b>100.0%</b>

**8. Has this project previously received state funding? Yes**

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		
2017-18		4,000,000	66C	Yes

**9. Is future-year funding likely to be requested? Yes**

a. If yes, indicate non-recurring amount per year. 4000000



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**10. Details on how the requested state funds will be expended**

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Operational Costs:</b>		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	The total project cost is projected at \$20M. The state funding request would fund the following items in the project: Fire Protection, Safety and Security, and Sitework to remain in compliance with all state regulations pertaining to new construction on vacant land. These 3 items are projected at \$1M	1,000,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,000,000</b>

**11. Program Performance:**

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

- Meet wellness needs for a growing campus enrollment and a growing east Pasco County population. - Expand recreational programs for the university and adults and children in the surrounding community. - Provide space and programs for families-summer camps and a community pool. - Provide space for business organizations to conduct meetings locally in east Pasco County. - Provide for government leaders to gather and conduct public meetings locally in east Pasco County.

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

- Fitness classes -Medical services -Provide meeting space availability -Provide community access and summer camps for children.

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

Fitness facilities including workout spaces and equipment. A recreational swimming pool that will also allow for programming such as water aerobics. Fitness classes held by professional instructors. Meeting spaces for community events. A medical partner will provide out-patient clinic services to the campus and community population with licensed medical personnel on staff daily.

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

There are 3 target audiences. University students, university faculty/staff and individuals and families from the surrounding community. The total target audiences served would be 15-25,000.



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

Annual attendance at all events as measured by both individual users as well as group attendees at classes and events. It is expected to have a minimum of 30,000 annual user visits.

**f. 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?**

None.

**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.**

The sole owner of the facility is Saint Leo University.

**13. Requestor Contact Information:**

- a. **Name:** Denny Moller
- b. **Organization:** Saint Leo University
- c. **E-mail Address:** denny.moller@saintleo.edu
- d. **Phone Number:** (352)588-8644

**14. Recipient Contact Information:**

- a. **Organization:** Saint Leo University
- b. **County:** Pasco
- 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:** Denny Moller
- e. **E-mail Address:** denny.moller@saintleo.edu
- f. **Phone Number:** (352)588-8644

**15. Lobbyist Contact Information**

- a. **Name:** None
- b. **Firm Name:** None
- c. **E-mail Address:**
- d. **Phone Number:**