



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 1746

1. **Title of Project:** Hands of Mercy Everywhere, Inc.-Bellevue Lakeside

2. **Senate Sponsor:** Dennis Baxley

3. **Date of Submission:** 02/11/2019

4. **Project/Program Description:**

The Bellevue Lakeside Hospitality Program targets at risk teens and pregnant teens from the Department of Children and Families that need structure of a good home life coupled with learning life skills, along with hospitality skills applicable to the restaurant and lodging industry. The goal is for each teen and teen mother to graduate high school and/or earn their GED to become immediately employable with a higher earning potential and career path which will allow them to be able to provide them for internship and employment in the hospitality field.

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	501,000
Fixed Capital Outlay	450,000
<b>Total State Funds Requested</b>	<b>951,000</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)	951,000	100.0%
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
<b>Total Project Costs for Fiscal Year 2019-2020</b>	<b>951,000</b>	<b>100.0%</b>

8. **Has this project previously received state funding?** No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		

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

a. If yes, indicate non-recurring amount per year. \$951,000

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



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Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits	Executive Director: Oversee program, application reviews, media, community support, monitor security, contract reviews, Dean of students and behaviors, background checks, and human resources.	60,000
Other Salary and Benefits	Finance Officer: Payroll and other financial maintenance and security: Inside and outside Banquet Manager: Booking the events.	100,000
Expense/Equipment/Travel/Supplies/Other	Commercial kitchen set-up, dishes, pots, glassware, tables, chairs and linens.	65,000
Consultants/Contracted Services/Study	Accountants Legal	30,000
<b>Operational Costs:</b>		
Salary and Benefits	Instructors and Life Coaches, Chef, Technology, Mental Health Counselor (part-time)	210,000
Expense/Equipment/Travel/Supplies/Other	Utilities, Food Costs and Training	24,000
Consultants/Contracted Services/Study	Repairs and Maintenance	12,000
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Renovation of the Belleview Community Center to mimic that of a hotel banquet room and food preparation area. Renovations to include the addition of a commercial kitchen, addition of central heating and air conditioning, refinish the wood floors, (2) bathrooms to meet code requirements, addition of office space, addition of storage space, outside handicap ramps and decking, and additional parking.	450,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>951,000</b>

**11. Program Performance:**

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

The Belleview Lakeside Hospitality Program targets at risk teens and pregnant teens from the Department of Children and Families that need structure of a good home life coupled with learning life skills, along with hospitality skills applicable to the restaurant and lodging industry. The goal is for each teen and teen mother to graduate high school and/or earn their GED to become immediately employable with a higher earning potential and career path which will allow them to be able to provide them for internship and employment in the hospitality field.

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

Life Skills, Job Training, mental health support, DJJ support, aging out of foster care support group. Renovate Belleview Community Center, offer community center as a training in hospitality and other vocational trades to teens dropping out of school or barely passing. A Hospitality Boot Camp which provides hands on training and assists with employment, disconnected youth age 16-24 not currently enrolled in school, on the verge of dropping out of school or those that do not have a goal.



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

A hands on hospitality educational program which provides youth and young adults age 16-24 with a (3) three month hands on curriculum and job training which prepares them for internship and employment in the hospitality field.

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

Jobless persons, economically disadvantaged, at-risk youth, high school students and children in foster care or those who have aged out of the foster care system.

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

Improve mental health, Improve quality of education, Increase or improve economic activity, Create specific immediate job opportunities, Enhance specific individual's economic self sufficiency, Reduce recidivism, Reduce substance abuse, and Divert from Criminal/Juvenile justice system.

**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?**

Loss of funding for not meeting deliverables.

**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.**

Hands of Mercy Everywhere, Inc./Bellevue Lakeside Hospitality

**13. Requestor Contact Information:**

- a. **Name:** Diane Schofield
- b. **Organization:** Hands of Mercy Everywhere, Inc./Bellevue Lakeside Hospitality Program
- c. **E-mail Address:** [diane@handsofmercyeverywhere.org](mailto:diane@handsofmercyeverywhere.org)
- d. **Phone Number:** (352)454-0830

**14. Recipient Contact Information:**

- a. **Organization:** Hands of Mercy Everywhere, Inc./Bellevue Lakeside Hospitality Program
- b. **County:** Marion
- 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:** Diane Schofield



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e. **E-mail Address:** [diane@handsofmercyeverywhere.org](mailto:diane@handsofmercyeverywhere.org)

f. **Phone Number:** (352)454-0830

#### 15. Lobbyist Contact Information

a. **Name:** None

b. **Firm Name:** None

c. **E-mail Address:**

d. **Phone Number:**