



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 1466

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

**4. Project/Program Description**

Home Builders Institute (HBI) is a career training organization in the building industry. HBI prepares participants with the skills and experience needed for successful careers through vocational training, job placement services, certification programs textbooks and curricula. The Building Careers for Veterans program promises job readiness and career connections for eligible veterans/military personnel and families as well as transitioning veteran offenders seeking vocational skills & employment opportunities. The goal is to assist participants to become self-sufficient and gainfully employed within the community and to provide opportunities for stackable, portable, industry-recognized credentials in high-growth, high-demand careers. Students are trained in a multiplicity of jobs and careers, resulting in increased marketability and employment options. Services also enable businesses to obtain highly skilled, certified workers, which increases tax revenues and reduces unemployment.

5. **State Agency to receive requested funds**
- State Agency contacted?**  Yes

**6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025**

Type of Funding	Amount
Operations	900,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>900,000</b>

**7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	900,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2024-2025</b>	<b>900,000</b>	<b>100%</b>

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

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2023-24	0	900,000	2297	No

9. **Is future funding likely to be requested?**  Yes
- a. **If yes, indicate nonrecurring amount per year.**

b. **Describe the source of funding that can be used in lieu of state funding.**

Not currently aware of any available funds.



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10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.

HBI requested and received \$3,352,100 in Federal Stimulus Funds in fiscal year 2020. Those funds were used to protect company payroll and ensure no layoffs were necessary during a time of revenue uncertainty. In June 2021, the Small Business Administration provided a determination letter that HBI utilized the funds for their intended purpose and the entire loan balance was "forgiven."

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

- Planning    
  Design    
  Construction    
  N/A

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

13. 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	Project management costs including recruitment, management over implementation and training operations, information dissemination, program fidelity and compliance, information accessibility, general oversight.	46,250
Other Salary and Benefits	Indirect costs allocation for administrative overhead including Human Resource management, Financial management, Technology Management, Executive Office Management.	100,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	Personnel costs for regional managers, regional career development coordinators, and instructors.	662,750
Expense/Equipment/Travel/Supplies/Other	Includes direct costs to accomplish the program deliverables. This includes communications, supplies and equipment, local travel, training materials, tools and equipment and certification costs.	91,000
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		



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Construction/Renovation/Land/ Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>900,000</b>

**14. Program Performance**

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

Enhance specific individual's self sufficiency, increase or improve economic activity and improve quality of education by offering vocational skills, certifications, job readiness, and placement assistance to veterans/military personnel and families as well as transitioning veteran offenders. Fees for services are as follows:

- Enrollments: \$3,000/participant,
- Training Completions: \$2,500/participant,
- Employment Placements: \$3,600/participant,
- Raise/Promotion in Employment: \$2,400/participant,
- Post-Secondary Education: \$2,500/participant, and
- Administrative Fees: \$230,000.

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

Initial assessment interview, develop service plan and goals with action steps, enrollment, training, certification and/or credential attainment, and job placement assistance.

**c. What direct services will be provided to citizens by the appropriation project?**

The HBI Building Careers for Veterans Program promises job readiness and career connections for eligible veterans/military personnel and families as well as transitioning veteran offenders seeking vocational skills & employment opportunities. The goal of the program is to help participants become self-sufficient and gainfully employed within the community and to provide opportunities for stackable, portable, industry-recognized credentials in high-growth, high demand careers.

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

Veterans/military personnel and families as well as transitioning veteran offenders, including jobless persons, homeless, economically disadvantaged persons, physically disabled, university/college students, currently or formerly incarcerated persons, and drug offenders (in criminal Justice). Between 100 and 200 are expected to be served.

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

Improve quality of education through vocational skill completion and training completion; measured by the number of industry-recognized credentials earned as a result of the training. Increase or improve economic activity by adding skilled labor to the workforce; measured by the number of job placements. Job creation; measured by the number of HBI staff positions funded by the program. Enhance specific individual's economic self sufficiency by ensuring gainful employment of program participants; measured by the number of participants placed in employment and initial wage earned. Divert from Criminal Justice system by providing gainful employment of program participants; measured by the Number of participants placed in employment and initial wage earned.

**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 the contract?**

Financial consequences are to be imposed if 80% of each deliverable goal is not achieved.

**15. Requester Contact Information**

**a. First Name**  **Last Name**

**b. Organization**

**c. E-mail Address**



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d. Phone Number  Ext.

#### 16. Recipient Contact Information

a. Organization

b. Municipality and County

#### c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

d. First Name  Last Name

e. E-mail Address

f. Phone Number

#### 17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number