



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 3242

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

At the Adult Literacy League, our mission is to empower Central Floridians to be thriving members of our community through literacy and education. We do this by training volunteers to serve as one-to-one tutors and class instructors to more than 1,500 adults annually. A community made up of residents who can read, write, and speak English is safer, healthier, and thriving. With support from the State of Florida, we hope to reach all adults in Central Florida who would benefit from our services.

5. **State Agency to receive requested funds**

State Agency contacted? No

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

Type of Funding	Amount
Operations	25,000
Fixed Capital Outlay	0
Total State Funds Requested	25,000

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)	25,000	20%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	100,000	80%
Other	0	0%
Total Project Costs for Fiscal Year 2024-2025	125,000	100%

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

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2023-24	0	25,000	119	Yes

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.**

local government, corporate, and private foundations

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

Yes



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

Forgiven PPP loans - \$71,000 & \$55,000 - all funds were used for payroll and rent. Additionally, we qualified for \$83,000 in ERTC funds - also used for employee payroll.

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
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Program Manager - salary + payroll taxes + benefits	2,500
Other Salary and Benefits	Intake & Assessment Specialist - salary + payroll taxes + benefits Receptionist/Program Assistant - salary + payroll taxes + benefits	2,500
Expense/Equipment/Travel/Supplies/Other	A percentage of each of the following operating costs: Current facility rent, internet/telephone, computers/technology/databases (including student data management), curriculum/books/assessments, volunteer management.	20,000
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		25,000

14. Program Performance

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



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We will recruit, orient, and train volunteers to serve as tutors and instructors to the adult students we serve. We offer more than 30 in-person and online classes serving adult learners in Central Florida. We are currently supporting the work of more than 250 pairs (volunteer tutor + student). Adult Literacy League students are working to improve their reading, writing, and English communication skills so that they might enter the workforce, become US Citizens, earn a GED or high school equivalency, or communicate with their children's teachers - just a few examples of our students' goals.

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

One-to-one tutoring (virtually and in-person), English conversation classes, ABE (Adult Basic Education) classes, GED preparation, US Citizenship preparation.

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

One-to-one tutoring and class instruction.

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

Adults aged 18 and older in Orange, Osceola, and Seminole counties. Our goal is to recruit and serve fifty (50) new adult learners.

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

Improved quality of life through improved literacy skills. Increased English language proficiency. Improved health and safety through increased access to health and financial literacy programming. Entrance into and improved employment. Enhanced economic self-sufficiency through improved employment.

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?

If the Adult Literacy League fails to meet the deliverable or performance measures, an appropriate penalty would be the loss of a percentage (correlated to the percentage of deliverable "failure") of grants funds.

15. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

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



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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