



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2023-2024

LFIR # 1015

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

To purchase and outfit a residential property for use as a training facility for student with special needs to develop functional living skills and employability skills in order to prepare them for independent living and competitive employment. Students will also create a business that allows them to learn the financial, inventory, sales, and delivery skills.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	457,500
Total State Funds Requested	457,500

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	457,500	68%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	220,000	32%
Total Project Costs for Fiscal Year 2023-2024	677,500	100%

8. Has this project previously received state funding?

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

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

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

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.



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Southeastern University (SEU) received \$29,713,739 of Higher Education Emergency Relief Funds. SEU disbursed \$12,899,701 directly to students while \$16,814,038 was used to write off student accounts, pay for pandemic related health, safety and security needs, and lost revenue.

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

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

Yes

c. What is the estimated start date of construction?

09/01/2023

d. What is the estimated completion date of construction?

12/01/2023

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.

Southeastern University. The owners of the facility and the requesting entity are the same.

13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other	LifeSkills equipment purchases for outfitting the house. Additionally includes the purchase of a transportation vehicle outfitted for the physically disabled.	167,500
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/ Planning Engineering	Cost includes the purchase of a LifeSkills house and the cost of labor for renovating the house.	290,000
Total State Funds Requested (must equal total from question #6)		457,500

14. Program Performance

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

To purchase and outfit a residential property for use as a training facility for student with special needs to develop functional living skills and employability skills in order to prepare them for independent living and competitive employment. Students will also create a business that allows them to learn the financial, inventory, sales, and delivery skills.

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



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PSE faculty/staff will implement Life Skills lessons through a variety of experiential learning activities/assessments such as cooking, food safety, cleaning, organizing, community-based learning field trips and entrepreneurship.

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

Teaching independent living skills, providing community-based field trips, and teaching entrepreneurship to increase students' employability and contribution to their households and local community.

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

Persons with poor mental health, persons with poor physical health, economically disadvantaged, high school students, University students, physically disabled, developmentally disabled. We estimate 50-100 individuals will be served by this appropriation.

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

The expected benefit or outcome of this project is the development of valuable life skills in individuals with developmental and physical disabilities through hands-on learning in a LifeSkills house. These skills include safety protocols for completing household chores, healthy cooking, generating income from employable skills, and budget management. The project aims to improve the quality of education for students preparing to transition from secondary education to post-secondary education and increase readiness for post-secondary transition. The methodology for measuring these outcomes includes tracking percentage score increases from an internally developed Assessment of Functional Living Skills and the percentage of alumni from the program who move on to employment or post-secondary transition programs.

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?

Return of state issued 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
☐ Other (please specify)



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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