



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 2498

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

Since its inception, ACT has helped to change the lives of over 5000 middle and high school students and their families, with a 100% high school graduation rate and 90% college placement rate for participants, who are considered by the school district to be at-risk and high-risk youth. State funding would allow ACT to replicate and scale this unique and highly successful program, boosting the number of children served annually from 700 to over 3,000 in the Tampa Bay area. Expenses associated with this request include hiring teaching staff, providing materials and equipment for students to learn the skills set-needed to excel, and ensuring transportation for student accessibility to its programs.

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	250,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>250,000</b>

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)	250,000	83%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	50,000	17%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>300,000</b>	<b>100%</b>

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?**



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Yes

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

Funds received were utilized to maintain staff and continue organizational operations during the pandemic. All PPP funds have been 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

**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	Executive Director/Project Head	44,000
Other Salary and Benefits	Programs Administrative Assistant	30,500
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	Salary and Benefits Per Year. ACT employs a Program Coordinator to assist with implementation	40,000
Expense/Equipment/Travel/Supplies/Other	Program Expenditures/Equipment/Supplies; Parents/Students Outreach Marketing	20,500
Consultants/Contracted Services/Study	Consultants/Contracted services	115,000
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>250,000</b>

### 14. Program Performance

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



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This program will provide more than 3,000 at-risk and underserved students in Tampa Bay area schools with interdisciplinary learning experiences to prepare them for high school graduation and career opportunities in the creative workforce after high school graduation. This program effectively provides an external support system for students who do not have the resources to excel academically, mentally, and professionally.

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

ACT provides weekly before and after-school Workshops and Master classes in multimedia/creative technology, performing and visual arts, leadership and entrepreneurship development, financial literacy, and health and wellness at Tampa Bay middle and high schools.

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

Through various creative and performing arts programming, students will be provided the skills needed to thrive in high school while building a path toward future successful careers in the Creative Workforce, while also developing their social and emotional well-being.

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

Underserved and at-risk youth, with 3000 middle school and high school students expected to complete the program.

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

ACT curriculum fosters problem-solving skills, self-esteem, entrepreneurial thinking, financial literacy, and critical thinking. The graduation rate among participants, considered by the school district to be at-risk and high-risk youth, is 100%, with many students pursuing careers in the arts and culture sector. The proven success of the ACT program provides a model and a foundation to scale a workforce development strategy designed for the rapidly growing arts, culture, and entertainment sectors.

**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?**

Funds for deliverables not met will be returned to the State.

**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



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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**