



# The Florida Senate

## Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Character Speaks Adult Re-Entry Program

2. **Senate Sponsor:** Keith Perry

3. **Date of Submission:** 01/18/2018

4. **Project/Program Description:**

Character Speaks Adult Re-entry Program (CSARP) is a comprehensive vocational training program aimed at placing adult work release inmates into well paying, long term employment.

5. **State Agency Contacted?** Yes

a. If yes, which state agency? Department of Corrections

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
140,000		140,000

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	0	0.0 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 140,000

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? No

b. In the previous 5 fiscal years, how many years was funding provided? (Optional)

c. What is the most recent fiscal year the project was funded?

d. Were the funds provided in the most recent fiscal year subsequently vetoed?

e. Complete the following Worksheet.



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<b>FY:</b>	<b>Input Prior FY Appropriation for this project for FY 2017-18</b> (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
<b>Column:</b>	<b>A</b>	<b>B</b>	<b>C</b>
<b>Funds Description:</b>	<b>Prior Year Recurring Funds *</b>	<b>Prior Year Nonrecurring Funds *</b>	<b>Total Funds Appropriated (Column A + Column B)</b>
<b>Input Amounts:</b>			

### 10. Is future-year funding likely to be requested?

Yes

#### a. If yes, indicate non-recurring amount per year.

140,000

### 11. Program Performance:

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

With the the funding requested, the Character Speaks Adult Re-entry Program (CSARP) will be able to double its operations from 208 students annually to 416 annually. Additionally, the funds requested will allow CSARP to expand operations to service Lake City and the surrounding North Florida region, in addition to maining operations at the program's existing Gainesville facility.

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

Resume Building, speech proficiency, interview training, role play, employer expectations

#### c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input checked="" type="checkbox"/> Executive Director/Project Head Salary and Benefits	Executive Director: Salary \$62,400 (\$30 an hour X 40 hours X 52 weeks). Benefits total out to \$3,422. ( This includes \$200 a month for Health Insurance and \$46 a month for phone).	65,822



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<input checked="" type="checkbox"/> Other Salary and Benefits	Administrative Assistant: Salary \$20,800 (\$20 an hour X 20 hours X 52 weeks). Teacher in Gainesville: Compensation equals \$4,160 (\$20 an hour X 4 hours X 52 weeks). Serving 208 students per year. Teacher in Lake City: Compensation equals \$4,160 (\$20 an hour X 4 hours X 52 weeks). Serving 208 students per year. Job Placement Coordinator: Salary \$39,000 (\$25 an hour X 30 hours X 52 weeks). Benefits total out to \$2,400. (\$200 a month for health insurance). Supplies: \$1,158 ( This includes	70,520
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Supplies: \$1,158 ( This includes 300 folders for each site, projector and tripod for each site and pens and pencils)Travel: \$2,500 for gas	3,658
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input type="checkbox"/> Construction/Renovation/Land/Planning Engineering		
TOTAL		140,000

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



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As a result of the funding, 416 work release inmates will receive comprehensive vocational training and be placed with an employer. The program will provide long-term, full time employments to adult work release inmates located in Gainesville and Lake City. There is a 30% recidivism rate for inmates within the first three years of release. This means 62 of CSARP students (30% of 208) are likely to re-offend. Last year the CSARP success rate was 50%. That means 31 of those students will not re-offend and receive gainful employment. The cost to the taxpayer for the State of Florida is \$18,050 per year for each inmate. This means we will save the taxpayer \$18,050X31=\$559,550.

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

416 adult work release inmates annually

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

After nearly 1 year of classes, CSARP has had over 200 students complete our program at the Santa Fe Bridge Work Release Center in Gainesville. Every student has gained employment upon completion of the program. We have had 10 students who had behavioral issues and have been sent back to prison. That number constitutes less than 5%. Even those students who had behavioral issues gained employment after they graduated from our program.

**g. 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?**

Reductions in funds from the state as a percentage of failed program participants

**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.**

N/A

**13. Requestor Contact Information:**

- a. **Name:** Sammie Desai
- b. **Organization:** Character Speaks Adult Reentry Center
- c. **Email:** Characterspeaks@gmail.com
- d. **Phone Number:** (352)317-1136

**14. Recipient Contact Information:**

- a. **Organization:** Character Speaks Adult Reentry Center
- b. **County:** Alachua, Columbia
- c. **Organization Type:**
  - ☐ For Profit
  - ☒ Non Profit 501(c) (3)
  - ☐ Non Profit 501(c) (4)
  - ☐ Local Entity
  - ☐ University or College
  - ☐ Other (Please specify)



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- d. Contact Name:** Sammie Desai
- e. E-mail Address:** Characterspeaks@gmail.com
- f. Phone Number:** (352)317-1136

**15. If there is a registered lobbyist, fill out the lobbyist information below.**

- a. Name:** Tom Griffin
- b. Firm:** Smith, Bryan & Myers
- c. Email:** tgriffin@smithbryanandmyers.com
- d. Phone Number:** (561)891-7122