

## The Florida Senate Local Funding Initiative Request Fiscal Year 2020-2021

LFIR # 1272

	0 0					
enate Sponsor	Oscar Braynon					
ate of Request	11/12/2019					
roject/Program	Description					
tudent leadership pro nodel has been embr	ELeaders (MTL) is Broward County ogram that serves youth who are at- aced by the Broward County Schoo low in every high school in the distri	risk for nols (BCPS	ot graduating 6) and the co	and/or rei mmunity. N	maining in schooland	ol/ Since its inception, t cross the District have r
tate Agency to		Departr	ment of Ed	lucation		
	onrecurring Request for Fi	iscal Ye	ear 2020-2	021		
Type of Funding	g		Amoun	t		
Operations			4	00,000		
Fixed Capital Ou	ıtlay			000		
Total State Fun	ds Requested		4	00,000		
-	t for Fiscal Year 2020-202	1 (inclu				
Type of Funding	g		Amoun	t	Percentage	е
Type of Funding Total State Fund	<b>g</b> s Requested (from question		Amoun			е
Type of Funding Total State Fund Matching Funds	<b>g</b> s Requested (from question		Amoun	t	Percentage	e 0
Type of Funding Total State Fund Matching Funds Federal	<b>g</b> s Requested (from question		Amoun	<b>t</b>	Percentage 38.0 %	6
Type of Funding Total State Fund Matching Funds Federal	g s Requested (from question s		Amoun	t 400000 00	38.0 %	6
Type of Funding Total State Fund Matching Funds Federal State (excluding Local	g s Requested (from question s		Amoun	00 00	38.0 % 0 %	6
Type of Funding Total State Fund Matching Funds Federal State (excluding Local Other	g s Requested (from question s	n #6)	Amoun	00 00 59,310	38.0 %  0 %  0 %  62 %	6
Type of Funding Total State Fund Matching Funds Federal State (excluding Local Other Total Project Co as this project p	s Requested (from question the amount of this request)  osts for Fiscal Year 2020-2  oreviously received state f most recent instance:	2021 funding	Amoun  6  1,0	00 00 59,310 00 59,310	38.0 %  0 %  0 %  62 %  0 %	6
Type of Funding Total State Fund Matching Funds Federal State (excluding Local Other Total Project Co	s Requested (from question the amount of this request) osts for Fiscal Year 2020-2 oreviously received state f	1 #6)	Amoun  6  1,0	00 00 59,310 00 59,310	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	e

If yes, indicate nonrecurring amount per year.

400,000



## The Florida Senate Local Funding Initiative Request Fiscal Year 2020-2021

LFIR # 1272

#### 10. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	The district will utilize existing staff to manage the program.	0
Other Salary and Benefits		
Expense/Equipment/ Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs: Oth	er	
Salary and Benefits		
Expense/Equipment/ Travel/Supplies/Other	Program participates (students) earn several incentives to improve their grades and meet school graduation requirements. Student mentors also earn incentives to achieve academic excellence. Fund may also be used for educational field trips.	400,000
Consultants/Contracted Services/Study		
Fixed Capital Construc	tion/Major Renovation:	
Construction/Renovation/ Land/Planning Engineering		
Total State Funds Re	quested (must equal total from question #6)	400,000



d.

### **The Florida Senate Local Funding Initiative Request Fiscal Year 2020-2021**

LFIR # 1272

### 11.

1.	Program Performance
	What specific purpose or goal will be achieved by the funds requested?
	The funds will be used to expand the MTL program that aims to increase graduation rates among minority students and increase industrial certification among high school students. The funds will also be utilized to conduct college tours within the state of Florida, exposing minority students to colleges and universities within the state.
b.	What activities and services will be provided to meet the intended purpose of these funds?
	The program has partnered with Take Stock in Children, Big Brothers and Big Sisters, and the Mourning Family Foundation, exposi participants to various cultural experiences. The following activities will be offered: Florida College Tours, Peer to Peer mentorships study hall programs, District-wide events, graduation workshops and assistance completing FAFSA Applications.
C.	What direct services will be provided to citizens by the appropriation project?
	MTL parents, guardian and the community will attend monthly parent workshops to cover topics such as: graduation requirements, grading, stages of adolescences development and academic requirements.
d.	Who is the target population served by this project? How many individuals are expected to be served?
	The program currently serves over 10,000 students within the District. Upperclassmen with a 3.0 GPA or above who demonstrate leadership skills, are paired with lower-classmen who have earned less than 2.0 GPA for a two-year mentoring program. The additional funds will be used to expand this program.
e.	What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
	Participants in the program have an opportunity to interact with higher achieving high school and college students who serve as mentors and role models, thus helping students make a successful transition from high school to college and/or the workplace. The program also aims to increase graduation rates, particularly with minority males, to ensure success GPA and graduation rates.
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 in the contract?
	No future funding for the program.



# The Florida Senate Local Funding Initiative Request Fiscal Year 2020-2021

LFIR # 1272

N/A	A				
Re	equestor Contact	t Information			
a.	First Name	John	Last Name	Sullivan	
b.	Organization	Broward County Public Schools			
c.	E-mail Address	johnj.sullivan@browardschools.co	n		
d.	Phone Number	(754)321-2608	Ext.		
Re	ecipient Contact	Information			1
a.	Organization	Broward County Public Schools			
b.	Municipality and	County Broward			
C.	Organization Typ	pe			
	O For-profit E	ntity			
	O Non-Profit 5	501(c) (3)			
	O Non-Profit 5	501(c) (4)			
	<ul><li>Local Entity</li></ul>	,			
	O University of	or College			
	Other (plea	se specify)			
d.	First Name	John	Last Name	Sullivan	
e.	E-mail Address j	ohnj.sullivan@browardschools.com	1		
	Phone Number		-		
Lc	obbyist Contact I	nformation			
a.	Name	Yolanda Jackson			
b.	Firm Name	Becker			