



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 2076

1. Project Title Hillsborough Juvenile Delinquency/Gun Violence Prevention

2. Senate Sponsor Janet Cruz

3. Date of Request 03/17/2021

4. Project/Program Description

Using evidenced based practices to reduce recidivism amongst juvenile offenders, while tackling the increase in juvenile gun violence in Hillsborough County through Mentorship, Educational Supports, Life Skills, and Vocational Exposure through the Evening Reporting Center and Juvenile Holistic Mentorship Initiative

5. State Agency to receive requested funds Department of Juvenile Justice

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

Type of Funding	Amount
Operations	100,000
Fixed Capital Outlay	0
Total State Funds Requested	100,000

7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	100,000	40%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	98,000	40%
Local	50,000	20%
Other	0	0%
Total Project Costs for Fiscal Year 2021-2022	248,000	100%

8. Has this project previously received state funding? No

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

9. Is future funding likely to be requested? Yes

a. If yes, indicate nonrecurring amount per year. 100,000

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

Fundraising efforts, support from county government

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

No

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



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11. 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	Staff support/mentorship and outreach coordinator - to serve as liaison between ERC staff, Public Defender's office, State Attorney's office, Detention Advisory Board, and trained members for matching of youth. Position also works to coordinate community forums, job fairs, faith based volunteer events and vocational/career workshops for eligible youth.	40,000
Expense/Equipment/Travel/Supplies/Other	Program incentives, office supplies, mentor supports, field trips/career exposure, guns down rallies/youth events, training wage subsidies for youth	35,000
Consultants/Contracted Services/Study	Transportation support for youth to include bus passes, van travel, etc. Mental health and substance abuse counseling services	25,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		100,000

12. Program Performance

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

Dual Purpose Project:

To further support the implementation of the Evening Reporting Center in Hillsborough County, for youth on Supervised Release status with pending delinquency proceedings. Funds will be used to expand mentorship opportunities, educational support and life skills, while ensuring: no failures to appear for court hearings.

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

Intensive care management, academic support (tutoring, credit recovery), mentorship/matching, job skills training, placement and apprenticeship, mental health counseling, and substance abuse counseling.

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

Increased community safety through juvenile interventions, mental health support, and increase in social cohesion.

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

The project will serve those who are economically disadvantaged, at-risk youth, homeless individuals, high school students, and drug offenders. This project expects to serve 101-200 individuals in the aforementioned populations.

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



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Expected outcomes include improvement of mental health, quality of education, protecting the general public from harm, increasing/improving economic activity, reducing recidivism, and diverting individuals from the juvenile justice system. 100% of youth enrolled will complete Cognitive Behavioral Modification training programming. 50% of truant youth will be placed back within the school system and no longer classified as truant. 90% of youth enrolled will remain crime free during and up to 90 days post program (no new charges). No failures to appear for court hearings and no technical violations resulting in a secure detention placement.

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?

1. Reduction of invoice for non-delivery of service
The amount of any reduction shall be based upon the compensation for those services not performed during the payment period.
2. Financial consequences for failure to submit corrective action plan (if applicable), failure to implement corrective action plan. Further failures to make acceptable progress: total monthly value of contract x 1.0% = Financial Consequence per deficiency per day until remedied.

13. 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.

N/A – There will be no fixed capital outlay funding required.



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14. Requestor Contact Information

a. First Name Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

15. 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)

d. First Name Last Name

e. E-mail Address

f. Phone Number

16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number