



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1693

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

**4. Project/Program Description**

The funding will be used to renovate classroom and laboratory space constructed in 1967 and last renovated in 2001. This project will incorporate some cosmetic improvements such as paint and floor covering but is primarily intended to address some major deficiencies in electrical, plumbing, lighting, envelope and HVAC systems. Replacement of aging restroom facilities, improvements to ADA accessibility, replacement of inefficient HVAC systems, and technology upgrades will also be key components of the project. The renovation of these aging buildings will reduce the overall cost of deferred maintenance once completed.

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	754,258
<b>Total State Funds Requested</b>	<b>754,258</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)	754,258	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>754,258</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.**
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**10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?**



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

The college received \$8,947,567 in Federal assistance related to the COVID-19. Of these funds, \$1,234,721 was paid directly to the students in the form of cash to support educational needs; \$473,317 was used for health safety measures such as plexiglass shields and cleaning supplies; the remainder was used for technology, instructional equipment, instructor training, and class costs to adapt to remote and/or safe in-person instruction.

## 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)?

No

c. What is the estimated start date of construction?

January 1, 2024

d. What is the estimated completion date of construction?

June 30, 2026

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.

Gulf Coast State College

### 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		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Funds will be used to renovate the existing 56 year old Social Sciences Building to provide comfortable and safe classroom and faculty office space to promote efficient student learning experiences and opportunities. Renovation of this facility is 2020 Educational Plant Survey Recommendation 1.022 and is included in the college's 2023-24 Capital Improvement Program as Priority #2.	754,258
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>754,258</b>

### 14. Program Performance

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



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

Classroom instruction in credit programs offered by the college to include A.A., A.S. and Certificate programs as well as continuing education noncredit programs will be provided to students in classrooms that support high quality instruction and safety.

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

Classroom instruction and faculty office space will be the sole use of the facility.

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

All individuals pursuing education and training to improve their economic status and employability. The facilities will serve 800 or more individuals.

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

This project provides enhanced facilities including state-of-the-art teaching technologies in a comfortable and safe environment conducive to learning for all students, faculty and members of the community. Improved ADA accessibility and ventilation systems will provide additional safety measures for those utilizing the facility. Additionally, all programs at the college are intended to enhance students' economic self sufficiency while providing trained workforce for the community. The benefit or outcomes will be measured by student comments to specific questions on instruments such as climate and graduation surveys. Placement and earnings data provided by state workforce agencies will be used as well.

**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?**

Penalties will be decided by agency but could include returning 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



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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**