



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 2254

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

**4. Project/Program Description**

Broward Schools desires to launch a pilot mentoring program focusing on the mental health and well-being student athletes and those involved in competitive extra-curricular activities. Students would receive support in time/stress management, achieving a balance between their school, work, and/or sports lives, responsible social media usage, the college recruiting process, and the implications of future Name, Image, and Likeness (NIL) deals. Coaches and club sponsors would also be supported.

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	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>250,000</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.**

Private funding or grant dollars.

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.**

\$950M used to mitigate the impact from the COVID-19 pandemic through learning loss-tutoring, summer programs, instructional material, and teachers; nursing services; HVAC - clean air; retain teachers and staff, COVID related medical claims & sick leave; technology-online instruction; and charter school initiatives.

## 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		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	Create pilot program to provide appropriate support and resources to students, coaches, and club/activity sponsors.	250,000
Consultants/Contracted Services/Study		0
<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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**b. What activities and services will be provided to meet the intended purpose of these funds?**

This pilot program focusing on the mental health and the well-being of student athletes and those involved in competitive extra-curricular activities. As part of this initiative, students would receive support in time and stress management, achieving a balance between their school, work, and/or sports lives, responsible social media usage, and the college recruiting process.

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

In addition to supporting student athletes explained above, we will also support coaches and club sponsors with professional learning and workshops designed to foster positive relationships with their student athletes/competitors and creating supportive environments where their athletes/competitors not only shine as athletes and students, but also as well-rounded citizens.

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

The target population will be persons with poor mental health, at-risk youth, grade school students, and high school students.

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

1) Improve mental health = Measure: Time/stress management, achieving life balance (school, sports/clubs, and work), self-management, self-regulation, responsible decision-making. Method: Surveys of athletes and coaches will be used to determine students mindsets and ability to self-regulate and self-manage. Student surveys will also be used to measure the culture/climate of their respective teams/clubs. 2) Improve quality of education = Measure: Improved grades of students who participate in athletics and student activities. Method: Graduation rates and school grades.

**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?**

Future reduction of funding equivalent to the project funding amount.

**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)



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- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify) School District

**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**