

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 2977

1. Project Title	UF/IFAS Microbiology and Cell Sciences Teaching Laboratory						
2. Senate Sponsor	Travis Hutson						
3. Date of Request	03/01/2023						
4. Project/Program D	escription						
University of Florida size not meeting the teaching laboratory campus. Currently 5	early double the available teaching lab a. Students are limited in their ability to be demand. The approximately 4,540 so inventory. 5730 students are enrolled in majors the ire the use of this laboratory for gradu	o enroll in required micro quare feet of new space hat require at least one	obiology labs due to e will add 72 seats	to the current classroom to the University's			
5. State Agency to re	ceive requested funds Board of	of Governors					
State Agency conta	acted? No						
6 Amount of the Non	recurring Request for Fiscal Year 2	023-2024					
	recurring Request for Fiscal Teal 2			1			
Type of Funding Operations		Amoi	Amount				
Fixed Capital Outlay	/		<u> </u>	+			
Total State Funds			5,500,000				
	•			-			
7. Total Project Cost 1	for Fiscal Year 2023-2024 (including	g matching funds avai	lable for this proje	ect)			
Type of Funding		Amount	Percentage				
Total State Funds Requested (from question #6)		5,500,000	100%				
Matching Funds			00/	1			
Federal	amount of this required	0	0%	†			
Local	amount of this request)	0	0% 0%	†			
Other		0	0%				
	s for Fiscal Year 2023-2024	5,500,000	100%	1			
Total Project Costs	S IOI FISCAI TEAI 2023-2024	5,500,000	100%	J			
8. Has this project pr	eviously received state funding?	No					
Fiscal Year	Amount	Specific	Vetoed]			
(уууу-уу)	Recurring Nonrecurring	Appropriation #					
9. Is future funding li	kely to be requested?	No		_			
a. If yes, indicate n	onrecurring amount per year.						
b. Describe the so	urce of funding that can be used in	lieu of state funding.					
]			
40 Heatha antitures		adouble objetowant water	ted to the COVID	40 mandam:-0			
	uesting this project received any fe	ederai assistance rela	ted to the COVID-	19 pandemic?			
Yes							



11. Status of Construction

Planning

Other

Other

a. What is the current phase of the project?

ODesign

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0

0

0

0

5,500,000

5,500,000

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

REVENUE: \$76M DIRECT STUDENT AID & \$93M INSTITUTIONAL SUPPORT; EXPENSES:1) \$76M-DIRECT STUDENT AID; 2) \$93M-CAMPUS OPERATIONS: \$8.7M FOR IT INFRASTRUCTURE & EQUIPMENT FOR REMOTE/DISTANCE LEARNING; \$9.4M REIMBURSEMENTS FOR HOUSING/STUDY ABROAD; \$9.1M CAMPUS HEALTH/SAFETY; \$8.2M OTHER OPERATING/RESEARCH COSTS: STUDENT MENTAL HEALTH/BASIC NEEDS; \$57.6M FOR LOST REVENUES IN THE STUDENT UNION, EDUCATIONAL BUSINESS ACTIVITIES, PARKING, RESEARCH SERVICE CENTERS, MUSEUMS/PERFORMING ARTS CENTERS.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

Construction

b. Is the project "shovel ready"	No			
c. What is the estimated start d	ate of construction?	In progress.		
d. What is the estimated compl	August 2024.			
12. List the owners of the facility relationship between the own	to receive, directly or indirecters of the facility and the enti	ly, any fixed capital y.	outlay funding. Inc	lude the
The University of Florida Institu	te of Food and Agricultural Scie	nces		
13. Details on how the requested	state funds will be expended			
Spending Category		Description		
Administrative Costs:				
Executive Director/Project Head Salary and Benefits				(
Other Salary and Benefits				(
Expense/Equipment/Travel/Supplies				

14. Program Performance

Planning Engineering

Consultants/Contracted

Consultants/Contracted

Operational Costs: Other

Construction/Renovation/Land/

Expense/Equipment/Travel/Supplies/

Fixed Capital Construction/Major Renovation:

Services/Study

Services/Study

Salary and Benefits

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

Total State Funds Requested (must equal total from question #6)

laboratory space.

Construction of approximately 4,540 square feet of teaching



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Double the teaching laboratory space in the Microbiology and Cell Science building at the University of Florida. This project is vital to supporting STEM students pursuing pre-professional medical and graduate degrees. 17 degrees and 38 concentrations require the use of this laboratory for graduation. Currently 5730 STEM students are enrolled in majors that require at least one microbiology lab.

	quire the use of this laborative microbiology lab.	ory for gradua	ation. Current	ily 5730 STEN	I students are (enrolled in majors that
b. What activities	and services will be pro	vided to mee	t the intende	ed purpose of	these funds?)
Enrollment of STI	EM students. Administratio	n of Microbiol	ogy courses.			
c. What direct ser	rvices will be provided to	citizens by t	he appropria	ation project?	•	
Education and Le	earning					
d. Who is the targ	get population served by	this project?	How many i	individuals ar	e expected to	be served?
and 38 concentrat	al to supporting STEM stud tions require the use of this e at least one microbiology	laboratory fo	pre-professi r graduation.	onal medical a Currently 573	and graduate d 0 STEM stude	egrees. 17 degrees nts are enrolled in
e. What is the exp be measured?	pected benefit or outcom	e of this proj	ect? What is	the methodo	logy by whicl	n this outcome will
Increased gradua	ation rate and trained workf er biological science fields	orce pursuing	career fields	in nursing, m	edicine, dentist	try, veterinary
	uggested penalties that the		g agency ma	ay consider ir	addition to it	s standard penalties
for failing to mee	t deliverables or perform	ance measur	es provided	for the contr	act?	•
Standard contrac	t penalties are sufficient.					
15. Requester Contac	et Information					
a. First Name	Scott	Last Name	Angle			
b. Organization	University of Florida, Inst	itute of Food	and Agricultu	ral Sciences		
c. E-mail Address	jangle@ufl.edu					
d. Phone Number	(850)270-4010	Ext.				
16. Recipient Contact	Information					
a. Organization	University of Florida, Inst Agricultural Sciences	itute of Food	and			
b. Municipality an	d County Alachua					
c. Organization Ty	уре					
□For Profit Entity	1					
□Non Profit 501(c)(3)					
□Non Profit 501(c)(4)					
□Local Entity						
☑University or Co	ollege					
□Other (please s	specify)					



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d. First Name	Scott	Last Name	Angle		
e. E-mail Address	jangle@ufl.edu				
f. Phone Number	(850)270-4010				
17. Lobbyist Contact Information					
a. Name	Mary Ann Hooks				
b. Firm Name					
c. E-mail Address	mgosa@ufl.edu				
d. Phone Number	(850)681-0000				