



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 3004

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

New Life Village is seeking a state appropriation of \$500,000 to support their onsite wrap-around services for families, including the Village's onsite Trauma Informed Wellness, Resilience, and Character Development Program, which will help improve residents' housing stability, well being, access to health resources, educational attainment, and community connection.

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	500,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>500,000</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)	500,000	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>500,000</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.**

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

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



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## 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	Office furniture, technology, and supplies	60,000
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	Fund staff (Program Director, Social Worker, Resident Events & Volunteer Manager, Program Events Manager, full-time maintenance personnel, and our Compliance Director).	400,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Support contracted services provided to residents	40,000
<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>500,000</b>

### 14. Program Performance

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

As our community grows to over 150 residents, we will be greatly expanding the scope and scale of our programming. \$60,000 will fund a modular office to provide needed space for our growing staff, and \$400,000 will fund our staff. \$40,000 will support contracted services provided to residents.

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



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We provide a residential community where families seeking permanency for children impacted by foster care or trauma can seek healing in a safe and stable intergenerational Village. Funds will be used to expand the scope of our programming and provide contracted services to our residents.

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

Our Trauma-Informed Wellness, Resilience, and Character Development Program includes our case management services and a wealth of onsite programming such as mentoring, athletics, field trips, a wide range of educational workshops, and more. Programming provides opportunities for wellness & healing, education, and the development of supportive relationships.

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

The over 150 residents that live at New life Village.

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

Divert from Criminal/Juvenile justice system

Measure of Benefit Caregivers report improvements in child behavior, stability, and well-being since moving to New Life Village and participating in the Program. 95% of youth successfully graduate high school. Note the link between foster care, low graduation rates, and high rates of incarceration.

Outcome NLV Annual Outcome Survey; regular engagement with youth & families in our community

**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?**

Repayment of 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
- University or College
- Other (please specify)



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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