

1. Project Title

## The Florida Senate Local Funding Initiative Request Fiscal Year 2025-2026

Polk State College Building #1 Lakeland Campus (LAC)

**LFIR # 1004** 

2.	Senate Sponsor	Colleen Burton						
3.	Date of Request	1/30/2025						
4.	Project/Program D	escription						
	constructed in the la will support the crea assessment, and co upgrades, the funds electrical systems, a ADA accessibility st	ation of modern, flexible blaborative learning— swill address critical in and cabling. The project in the proje	g requires significa le spaces designe key elements of to afrastructure impro ct will also ensure safe and inclusive	ant upgrades to align do to facilitate hands-coday's instructional provements, including the that the building is fullearning environmen	with current education simulations, vide actices. In addition of modernization of ully compliant with lit for all students. The	onal needs. The funds or recording for self-to these instructional HVAC systems, fe-safety codes and his funding is essential		
5.	State Agency to re	ceive requested fund	<b>ds</b> Departme	ent of Education				
	State Agency conta	acted? Yes						
		recurring Request fo	or Fiscal Year 202	25-2026				
	Type of Funding	<u> </u>		Amo				
	Operating				0			
	Fixed Capital Outlay	Fixed Capital Outlay			6,141,785			
	<b>Total State Funds</b>	Requested		6,141,785				
<b>7</b> . '	Total Project Cost f	for Fiscal Year 2025-	2026 (including r	natching funds avai	lable for this proje	ect)		
<b>7.</b>	Total Project Cost f  Type of Funding	for Fiscal Year 2025-	2026 (including r	natching funds avai	lable for this proje	ect)		
7.	Type of Funding	for Fiscal Year 2025- Lequested (from quest				ect)		
7.	Type of Funding Total State Funds R Matching Funds			Amount	Percentage 50%	ect)		
7.	Type of Funding Total State Funds R Matching Funds Federal	Lequested (from quest	tion #6)	Amount 6,141,785	Percentage 50%	ect)		
7.	Type of Funding Total State Funds R Matching Funds Federal State (excluding the		tion #6)	Amount 6,141,785 0 6,141,785	Percentage 50% 0% 50%	ect)		
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8.	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project profit yes, provide the Fiscal Year (yyyy-yy) 2023-24	e amount of this requests for Fiscal Year 202 eviously received stance most recent instance Amount Recurring	st)  5-2026  ate funding? e:  nt  Nonrecurring 6,141,785	Amount 6,141,785  0 6,141,785  0 12,283,570  Yes  Specific Appropriation #	Percentage 50% 0% 50% 0% 0% 100%	ect)		
8.	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project profit yes, provide the Fiscal Year (yyyy-yy) 2023-24 Is future-year fund	e amount of this requests for Fiscal Year 202 eviously received stamost recent instance  Amount of this requests for Fiscal Year 202 eviously received stamost recent instance Amount Recurring	st)  5-2026  ate funding? e:  nt  Nonrecurring 6,141,785 ested?	Amount 6,141,785  0 6,141,785 0 0 12,283,570  Yes  Specific Appropriation #	Percentage 50% 0% 50% 0% 0% 100%	ect)		
8.	Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project profit yes, provide the Fiscal Year (yyyy-yy) 2023-24 Is future-year fund a. If yes, indicate n	e amount of this requests for Fiscal Year 202 eviously received stamost recent instance  Amount of this requests for Fiscal Year 202 eviously received stamost recent instance of the first	st)  5-2026  ate funding? e:  nt  Nonrecurring 6,141,785 ested? a per year.	Amount 6,141,785  0 6,141,785  0 12,283,570  Yes  Specific Appropriation # 17	Percentage 50% 0% 50% 0% 0% 100%	ect)		



**LFIR # 1004** 

### **Complete questions 10 and 11 for Fixed Capital Outlay Projects**

10. Status of Construction						
a. What is the current phase of the project?						
Planning • Design	Construction	O N/A				
b. Is the project "shovel ready" (i.	e permitted)?		No			
c. What is the estimated start date	07/01/2025					
d. What is the estimated completion	01/01/2027					
e. What funding stream will be use	ed for ongoing oper	ations a	and maintenance	of the project?		
Operating funds and carryforward funds.						
11. List the owners of the facility to relationship between the owners				tal outlay funding	. Include the	
The facility will be owned and ope	The facility will be owned and operated by Polk State College.					

### 12. 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					
Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/Other		0			
Consultants/Contracted Services/Study		0			
Fixed Capital Construction/Majo	r Renovation:				
Construction/Renovation/Land/ Planning Engineering	Funds will be used to renovate and modernize all classrooms and laboratory spaces including those for Nursing and Respiratory Care, computer labs, offices, and support spaces. All infrastructure systems, including HVAC, electrical, and cabling, as well as all life-safety and ADA-compliance will be upgraded.	6,141,785			
Total State Funds Requested (must equal total from question #6)					

### 13. Program Performance

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



**LFIR # 1004** 

Polk State is requesting \$6,141,785 to modernize Building #1, constructed in the late 1980s, by upgrading its facilities to support contemporary instructional methods. Today's students can benefit from classroom instructional methods that include hands-on simulation exercises and video recording so that students can evaluate their own performance while demonstrating mastery of important competencies. These systems require stable electronic and technology backbones combined with appropriately wired classroom and lab spaces. This project will modernize Building #1 to provide spaces to serve today's students.

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

This project will upgrade Building #1 to current instructional and life-safety standards. The renovation will replace all building infrastructure and systems, modernize laboratory spaces, and reconfigure instructional and support spaces. Additionally, all renovations will bring the building into compliance with current fire safety and Americans with Disabilities Act standards.

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

Polk State's mission is to provide accessible, affordable, quality higher education and training to the Polk County community. With 92% of Associate in Science graduates and 85% of baccalaureate degree graduates employed or continuing their education, some of the highest percentages in the state, Polk State consistently produces graduates who are well-prepared for the workforce. Projects such as the modernization of Building #1, provides the educational environment which is critical to students' success.

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

Polk State currently serves over 9,300 students on the Lakeland Campus who will be the primary beneficiaries of this project with enhanced classrooms, laboratories, and academic support spaces. Additionally, Building 1 houses the Lakeland Campus's Student Center and Cafe which are regularly used as meeting spaces which are open to the public and community groups.

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

While this project is not expected to increase the number of degrees and certificates produced, it is anticipated to improve the College's retention and completion rates. Student performance and persistence has shown marked improvement when faculty can create multiple opportunities for students to understand, visualize, and experience challenging concepts. This project will provide physical improvements to the classroom and lab spaces to make it possible to use technology to facilitate student learning and thereby enable student success.

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 in the contract?

Р	enalties should be consistent with those outlined for fixed capital outlay projects.
14. Is 1	his project related to mitigation, response, or recovery from a natural disaster? No
a. If	Yes, what phase best describes the project?
	Mitigation (reducing or eliminating potential loss of life or property)
	Response (addressing the immediate and short-term effects of a natural disaster)
	Recovery (assisting communities return to normal operations, including rebuilding damaged infastructure)
b. N	ame of the natural disaster (or Executive Order # for events not under a federal declaration):



LFIR # 1004

☐ Yes, Received							
□ No							
☐ No, but intends t	□ No, but intends to apply						
		oot ID#·					
a. II yes, provide ti	a. If yes, provide the FEMA project worksheet ID#:						
b. Provide the total	b. Provide the total project cost listed on the FEMA project worksheet:						
16. Has the entity app	olied for or received state	e assistance t	or this project (c	other than this requ	est)?		
☐ Yes, Applied			o p. 0,000 (0				
☐ Yes, Received							
□ No							
□ No, but intends t	to apply						
<ul><li>a. If yes, specify th Commerce):</li></ul>	e program and state age	ency (ex. Loca	al Government E	mergency Bridge Lo	oan, Department of		
17. Requester Contac	t Information						
a. First Name	Angela	Last Name	Falconetti				
b. Organization	Polk State College						
c. E-mail Address	c. E-mail Address agarciafalconetti@polk.edu						
d. Phone Number	(863)297-1098	Ext.					
18. Recipient Contact	Information						
a. Organization	Polk State College						
b. Municipality and							
c. Organization Ty	-						
□For Profit Entity							
·	□Non Profit 501(c)(3)						
□Non Profit 501(d	C)( <del>4</del> )						
□Local Entity							
☑I Iniversity or Co	☑University or College						



**LFIR # 1004** 

□Other (please specify)					
d. First Name	Cindy	Last Name	Baker		
e. E-mail Address	cbaker@polk.edu				
f. Phone Number	(863)292-3749	Ext.			
9. Lobbyist Contact Information					
a. Name Keaton A Griffin					
b. Firm Name The Griffin Group					
c. E-mail Address	c. E-mail Address keaton@thegriffingroup.com				
d. Phone Number	(863)528-2024				

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.