



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1161

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. Project/Program Description

Talent Bridge, will align current training programs through targeted industry outreach and engagement.
 - Establish an Industry-Driven Workforce Portal: Create a centralized platform that offers real-time labor market data, training resources, and actionable insights to facilitate informed decision-making for businesses and training providers.
 - Enhance Employment Opportunities for All Floridians: Increase access to employment for employed and unemployed and people with disabilities.
 - Create opportunities for industry engagement and workforce driven professional development initiatives.

5. **State Agency to receive requested funds**

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

Type of Funding	Amount
Operating	2,500,000
Fixed Capital Outlay	0
Total State Funds Requested	2,500,000

7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	2,500,000	66%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	250,000	7%
Local	0	0%
Other	1,000,000	27%
Total Project Costs for Fiscal Year 2025-2026	3,750,000	100%

8. **Has this project previously received state funding?** No

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. **Is future-year funding likely to be requested?** Yes

a. **If yes, indicate nonrecurring amount per year.**

b. **Describe the source of funding that can be used in lieu of state funding.**

For this program to scale state-wide there needs to be matching funds from the public sector in addition to private support.



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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
 N/A

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?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. 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.

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	Cover the cost for overhead of program including office space, supplies etc	126,000
Consultants/Contracted Services/Study	Consultant to oversee and administer program, including recording keeping, tracking and progress etc.	234,000
Operational Costs		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Covers the cost of tours and workplace experiences in different industry sectors the develop pathways event convening of industry, civic, and academic partners. Included is the cost to engage CBO's and workforce training providers to promote certs and cover cost for accommodation for those with disabilities, i.e. equipment etc.	661,625
Consultants/Contracted Services/Study	Custom designed software as a service platform designed for business and industry to learn about upskilling opportunities for current employees, and funds to market the program on social media and money for 3rd party auditing and support.	1,478,375
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		2,500,000

13. Program Performance

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



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To aggregates all talent development programs in one easy to use portal for business and industry which does not exist currently.

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

The development of a portal where business and industry can query training programs in the county to meet the upskilling needs of their employees.

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

Deeper connections of existing workforce and training programs to industry to better utilize existing programs and expand pathways to in demand employment.

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

The targeted population are the economically disadvantaged, jobless, underemployed, developmentally disabled and students.

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

This will increase wages, productivity and opportunities for both workers, and help businesses get the most from their workforce through better leveraging the myriad of training and educational programs offered through the county.

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?

If the program fails to meet the approved deliverables the first course of action will be to cure noted deficiencies within 90 days as it relates to business engagement efforts. If the portal fails to be delivered then the applicant will work with the state on a new timeline for delivery. If unable to cure the applicant will return any unused funds to the state.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

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 infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

15. Has the entity applied for or received federal assistance for this project?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:



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16. Has the entity applied for or received state assistance for this project (other than this request)?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

18. 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)

d. First Name **Last Name**

e. E-mail Address

f. Phone Number **Ext.**

19. Lobbyist Contact Information

a. Name

b. Firm Name



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c. E-mail Address

d. Phone Number

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