



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1769

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. Project/Program Description

We currently receive \$400,000 in funding each year from The Children's Trust to provide free after school programs to girls in Title 1 schools. With matching funds from the State, we will continue to enhance existing programs and expand to add new programs. Our programs equip elementary, middle and high school girls • living in underserved communities with the tools, skills, resources, and role models that place them on a steady path toward college and career.

5. **State Agency to receive requested funds**
- State Agency contacted?**

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

Type of Funding	Amount
Operating	400,000
Fixed Capital Outlay	0
Total State Funds Requested	400,000

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)	400,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	400,000	50%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	800,000	100%

8. **Has this project previously received state funding?**

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?**

a. If yes, indicate nonrecurring amount per year.

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

Complete questions 10 and 11 for Fixed Capital Outlay Projects



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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	Administrative support to manage and implement programs effectively.	50,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits	Teaching Staff; Program Management Staff	300,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Professional Development	50,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		400,000

13. Program Performance

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

We currently receive \$400,000 in funding each year from The Children's Trust to provide free after school programs to girls in Title 1 schools. With matching funds from the State, we will continue to enhance existing programs and expand to add new programs in Miami-Dade. Our programs equip elementary, middle and high schools girls living in underserved communities with the tools, skills, resources, and rote models that place them on a steady path toward college and career.

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



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Enhanced programming at 5 school sites and a summer program through the hiring of specialized staff to supplement reading intervention, behavioral challenges, and class room management training. Funds will also support expansion of elementary and middle school programs to Lincoln-Marti, a Title 1 K-8 school serving Hialeah and Miami-Dade.

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

Girls in our free after school programs receive more than 600 hours a year of high quality, research based programming that includes Academic Support, Life Skill Development, STEM, Art, and Fitness. Girls in our Middle School speech and debate clubs learn effective communication, goal setting, and advocacy. Our high school girls receive career readiness guidance and life skill development.

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

Our target population are low income minority girls attending Title 1 schools in Miami-Dade County. Additional funds will enable us to serve up to 400 girls.

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

Program participants will show Improvement in overall mental well-being, communication skills, critical thinking skills, emotion management, and realistic goal setting. Student and parent surveys are administered twice a year to measure outcomes. Girls will develop coping skills to effectively address emotional challenges that get in the way of academic success. We track school grades each quarter to measure academic improvement and to assess where additional support is needed.

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?

Standard contract penalties, followed by a corrective improvement plan that may include withholding of funds until improvements are made.

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.