

**LFIR # 1793** 

1. I	Project Title	Miami Learning E	i Learning Experience School Job Readiness Program					
2. \$	Senate Sponsor	Alexis Calatayud						
3. I	Date of Request	2/13/2025						
4. I	Project/Program De	escription						
1	of service to Florida' \$790,636 to assist the the second year we growth spurt and into	s special needs child ne school in providin are requesting funds erest in the commun	dren, young adults, g a job readiness p s for this project. D ity has grown. The	t Florida corporation and their families. Morogram to adults afte ue to the success of the program provides jold be exposed to the a	LE seeks an approper their 22nd birthday the project, we have to readiness, job coa	oriation of y. This is seen a ching and		
5. \$	State Agency to red	ceive requested fur	nds Agency f	or Persons with Disal	oilities			
5	State Agency conta	acted? No						
6. <i>F</i>	Amount of the Noni	recurring Request 1	for Fiscal Year 20	25-2026				
-	Type of Funding			Amo	unt			
	Operating			7	790,636			
	Fixed Capital Outlay	,			0			
•	Total State Funds I	Requested		790,636				
	Total Project Cost f Type of Funding	or Fiscal Year 2025	i-2026 (including	matching funds ava	ilable for this proje	ect)		
		equested (from ques	stion #6)	790,636	89%			
	Matching Funds		,	<u> </u>				
- 1.								
L	Federal			0	0%			
		amount of this requ	est)	0	0% 0%			
;		amount of this requ	est)					
<u>;</u>	State (excluding the	amount of this requ	est)	0	0%			
:	State (excluding the Local Other	amount of this requi		0	0% 0%			
8. I	State (excluding the Local Other  Total Project Costs  Has this project pre		25-2026 tate funding?	0 0 100,000	0% 0% 11%			
8. I	State (excluding the Local Other  Total Project Costs  Has this project pre	s for Fiscal Year 20	25-2026 tate funding? ce:	0 0 100,000 <b>890,636</b>	0% 0% 11%			
8. 1	State (excluding the Local Other  Total Project Costs  Has this project pro If yes, provide the	s for Fiscal Year 20 eviously received s most recent instan	25-2026 tate funding? ce:	0 0 100,000 890,636 Yes Specific Appropriation #	0% 0% 11% <b>100%</b>			
8. 1	State (excluding the Local Other  Total Project Costs  Has this project pro If yes, provide the  Fiscal Year (уууу-уу)  2024-25	s for Fiscal Year 20 eviously received s most recent instandand Amo Recurring	25-2026  tate funding? ce: unt Nonrecurring 395,318	0 0 100,000 890,636 Yes Specific Appropriation #	0% 0% 11% 100% Vetoed			
8. 1	State (excluding the Local Other  Total Project Costs  Has this project pro If yes, provide the Fiscal Year (уууу-уу) 2024-25	eviously received s most recent instandard Amo Recurring	25-2026  tate funding? ce: unt Nonrecurring 395,318	0 0 100,000 890,636 Yes Specific Appropriation #	0% 0% 11% 100% Vetoed			
8. I 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	State (excluding the Local Other  Total Project Costs  Has this project produced from the local state of the	eviously received s most recent instance  Amo Recurring 0 ing likely to be requenced.	25-2026  tate funding? ce: unt Nonrecurring 395,318 uested? nt per year.	0 0 100,000 890,636 Yes Specific Appropriation #	0% 0% 11% 100%  Vetoed No			



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

<ul><li>Planning</li></ul>	urrent phase of t	Construction	∙ N/A		
. Is the project	"shovel ready"	(i.e permitted)?			
, ,	•	ite of construction?			
d. What is the es	stimated comple	tion date of constru	ction?		
e. What funding	stream will be ι	sed for ongoing ope	erations and maint	enance of the project?	
		o receive, directly or ers of the facility and		ed capital outlay fundir	ng. Include 1

### 12. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	The project Head is calculated at 100% and the Executive Director is calculated at 30% of salary. Benefits are calculated at 22% of salary.	168,112
Other Salary and Benefits	Other administrative salaries included are Director of Finance and Registrar.  These positions are allocated at 30% of total salary and 22% for employee benefits.	49,650
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits	Salaries cover 4 instructors; 2 job coaches; 1 social worker and 1 paraprofessional all at 100% allocation to the program. There is 1 art teacher and 1 music teacher allocated at 10% and 1 Physical Education Instructor allocated at 50% of time. There are a total of 8.7 FTE's.	451,974
Expense/Equipment/Travel/Supplies/ Other	Expenses and occupancy (Utilities) are allocated by space usage and a rental for additional space for the work group. Additional items cover consumable items used by the participants.	120,900
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	790,636

### 13. Program Performance

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



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The purpose of the funds requested is to provide a job training program to meet the needs of individuals with intellectual and developmental delays.

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

The activities included are: Daily Living Skills; Job Coaching; Career Inventories; Social Activities and potential job placement.

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

Individuals will be provided the opportunity to take classes that will enhance their ability to secure a job. They will participate in volunteer job opportunities that will give them exposure to a variety of job opportunities. They will learn Daily Living Skills to assist them with personal skills. They will also receive job training for as long as is necessary to seek, learn and retain a job of their choosing.

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

The target population for the project are individuals no longer in high school who have developmental delays that leave them with low to moderate cognitive abilities. The program is expected to serve 60 individuals.

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

The outcome of this project is to improve the work skills of each individual. The primary outcome for all individuals is job and daily living readiness.

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?

Miami Learning Experience will return any unused money to the State of Florida.	
14. Is this project related to mitigation, response, or recovery from a natural disas	ster? 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 disast	er)
☐ Recovery (assisting communities return to normal operations, including rebuild	ing damaged infastructure)
b. Name of the natural disaster (or Executive Order # for events not under a fee	leral declaration):
15. Has the entity applied for or received federal assistance for this project?	
☐ Yes, Applied	
☐ Yes, Received	
□ No	
☐ No, but intends to apply	

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

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



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16. Has the entity app	olied for or received state	assistance f	or this projec	t (other than	n this request	)?
☐ Yes, Applied						
☐ Yes, Received						
□ No						
☐ No, but intends t	o apply					
a. If yes, specify th Commerce):	e program and state ager	ncy (ex. Loca	al Governmen	t Emergenc	y Bridge Loar	, Department o
7. Requester Contac	t Information					
a. First Name	Kevin	Last Name	Grace			
b. Organization	The Learning Experience Experience School	School, Inc.	dba Miami Lea	ırning		
c. E-mail Address	kagrace@mleschool.org					
d. Phone Number	(305)275-5900	Ext.				
8. Recipient Contact	Information					
a. Organization	The Learning Experience Miami Learning Experience	School, Inc. e School	dba			
b. Municipality and	d County Miami-Dade					
c. Organization Ty	ре					
□For Profit Entity						
☑Non Profit 501(d	c)(3)					
□Non Profit 501(d	c)(4)					
□Local Entity						
□University or Co	ollege					
□Other (please sp	pecify)					
d. First Name	Kevin	Last Name	Grace			
e. E-mail Address	kagrace@mleschool.org					
f. Phone Number	(305)275-5900	Ext.				
l9. Lobbyist Contact I	Information					
a. Name	Monica L. Rodriguez					



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b. Firm Name	Ballard Partners	
c. E-mail Address	monica@ballardpartners.com	
d. Phone Number	(850)577-0444	

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