

**LFIR # 2199** 

1. Project Title	Waypoint Techr	nical College Curricul	um		
2. Senate Sponsor	Corey Simon				
3. Date of Request	3/2/2025				
4. Project/Program De	escription				
	targeted guidance nd technical college	and support for care e designed to meet tl	ne unique needs of c	ourpose of the fund hildren in Florida's	s being requested is to child welfare and
5. State Agency to rec	eive requested fu	ınds Departme	ent of Children and Fa	amilies	
State Agency conta	cted? No				
	<u> </u>				
6. Amount of the Nonr	ecurring Request	for Fiscal Year 202	25-2026		
Type of Funding			Amo	unt	
Operating				1,500,000	
Fixed Capital Outlay				0	
<b>Total State Funds F</b>	Requested			1,500,000	
7. Total Project Cost fo		, ,	Amount	Percentage	]
Total State Funds R	equested (from que	estion #6)	1,500,000	7%	
Matching Funds Federal			0	0%	
State (excluding the	amount of this rea	uest)	0	0%	1
Local	amount of this req	ucstj	11,540,000	46%	1
Other			11,791,000	47%	1
Total Project Costs	for Fiscal Year 2	025-2026	24,831,000	100%	
8. Has this project pre If yes, provide the I	nost recent insta	nce:	Yes		1
Fiscal Year (уууу-уу)	Am	ount Nonrecurring	Specific Appropriation #	Vetoed	
2024-25	Recurring	375,000	318A		
					ı
<ol><li>Is future-year fundi</li><li>a. If yes, indicate no</li></ol>	9	•	No		
b. Describe the sou	rce of funding th	at can be used in li	eu of state funding.		1



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a. What is the c	urrent phase of t		_			
Planning	O Design	<ul><li>Construction</li></ul>	O N/A			
o. Is the project	"shovel ready"	(i.e permitted)?		Yes		
. What is the e	stimated start da	te of construction?				
d. What is the e	stimated comple	tion date of constru	ction?			
. What funding	stream will be u	sed for ongoing ope	erations a	nd maintena	nce of the proje	ect?
List the owner		o receive, directly or rs of the facility and			apital outlay fu	nding. Include th

### 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	Salary and Benefits	500,000
Expense/Equipment/Travel/Supplies/ Other	Expenses	1,000,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
<b>Total State Funds Requested (m</b>	ust equal total from question #6)	1,500,000

### 13. Program Performance

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

With 60% of foster youth being homeless, incarcerated, or deceased within two years of aging-out of foster care, foster youth are in need of targeted guidance and support for career preparation. The purpose of the funds being requested is to establish a career and technical college designed to meet the unique needs of children in Florida's child welfare and dependency system. It is expected that this will not only be the first of it's kind in the state of Florida, but also nationally. These funds will be used to renovate existing buildings for this purpose.

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

Technical and Vocational training and certifications to prepare students to be employable and productive citizens with experience in a marketable and needed skill that enables them to enter into a long-term career field.



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

A career and technical college for youth in Florida's child welfare system. The focus of this project is to target foster youth who can not be placed with traditional foster families or group homes because of mental health, complex trauma or Juvenile Justice involvement. Students will reside on campus, receive mental health treatment services, and earn a career certification.

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

The focus of this project is to target foster youth who can not be placed with traditional foster families or group homes because of mental health, complex trauma or Juvenile Justice involvement.

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

Expected outcomes for the citizens of Florida includes a reduced cost of public assistance to support foster youth aging out of the system. Data show a disproportionate rate of homelessness and incarceration. By providing foster youth with a skill, career development, and transition assistance, they become a self-sufficient member of society, significantly less reliant on government assistance.

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?

velopment has a long history of providing behavioral health, education, and juvenile justice services to the State of Florida. The performance history of these services should instill confidence for support of this request and the ability to provide meaningful services to the citizens of the State of Florida in return.

14. Is t	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):
15. Ha	s the entity applied for or received federal assistance for this project?
<b>"</b>	es, Applied
<b>□</b> `	es, Received
<b>-</b> 1	No
<b>-</b> 1	No, but intends to apply
a. If	yes, provide the FEMA project worksheet ID#:
b. P	rovide the total project cost listed on the FEMA project worksheet:

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



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☐ Yes, Applied				
☐ Yes, Received				
□ No				
☐ No, but intends to	o apply			
a If yes specify the	e program and state age	ency (ex. Loca	al Governmen	t Emergeno
Commerce):	- p. од. ш ш осило ид.			
17. Requester Contact	t Information			
a. First Name	Donnie	Last Name	Read	
b. Organization	Twin Oaks Juvenile Dev			
	dread@twinoaksfl.org			
d. Phone Number	_	Ext.		
	,			
18. Recipient Contact	Information			
a. Organization	Twin Oaks Juvenile Dev	elopment, Inc.		
b. Municipality and	d County Leon			
c. Organization Ty	ре			
□For Profit Entity				
☑Non Profit 501(c	c)(3)			
□Non Profit 501(c				
□Local Entity	/			
·				
□University or Co	_			
□Other (please sp	pecify)			
d. First Name	Donnie	Last Name	Read	
e. E-mail Address	dread@twinoaksfl.org			
f. Phone Number	(850)643-7698	Ext.		
I9. Lobbyist Contact I	nformation			
a. Name	Chip Case			
b. Firm Name	Jefferson Monroe Cons	ulting LLC		
c. E-mail Address	chip@jeffersonmonroe.c	com		
d. Phone Number	(850)544-2222			



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