

# Budget Detail Request - Fiscal Year 2016-17

Your request will not be officially submitted unless all questions and applicable sub parts are answered.

1. Title of Project: About Face
2. Date of Submission: 01/25/2016
3. House Member Sponsor(s): Colleen Burton

## 4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes  
***If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d***
- b. What is the most recent fiscal year the project was funded? 2015-16
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request (Note that Column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in Column G):

FY:	Input Prior Year Appropriation for this project for FY 2015-16 (If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2016-17 (If no new Recurring or Nonrecurring funding is requested, enter zeros.)			
	Column: A	B	C	D	E	F	G
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated  (Recurring plus Nonrecurring: Column A + Column B)	Recurring Base Budget  (Will equal non-vetoed amounts provided in Column A )	<b>INCREASED or NEW Recurring Requested</b>	<b>TOTAL Nonrecurring Requested</b>  (Nonrecurring is one time funding & must be re-requested every year)	<b>Total Funds Requested Over Base Funding</b>  (Recurring plus Nonrecurring: Column E + Column F)
Input Amounts:	0	1,250,000	1,250,000	0	0	2,000,000	2,000,000

- e. New Nonrecurring Funding Requested for FY 16-17 will be used for:  
 Operating Expenses     Fixed Capital Construction     Other one-time costs
- f. New Recurring Funding Requested for FY 16-17 will be used for:  
 Operating Expenses     Fixed Capital Construction     Other one-time costs

5. Requester:

- a. Name: Richard Semancik
- b. Organization: Paxen LLC
- c. Email: rsemancik@paxen.com
- d. Phone #: (727)461-1236 Ext. 3221

6. Organization or Name of Entity Receiving Funds:

- a. Name: Paxen LLC
- b. County (County where funds are to be expended) Manatee, Marion, Pinellas, Polk
- c. Service Area (Counties being served by the service(s) provided with funding) Manatee, Marion, Pinellas, Polk

7. Write a project description that will serve as a stand-alone summary of the project for legislative review. The description should summarize the entire project's intended purpose, the purpose of the funds requested (if request is a sub-part of the entire project), and most importantly the detail on how the funds requested will be spent - for example how much will be spent on positions and associated salaries, specifics on capital costs, and detail of operational expenses. The summary must list what local, regional or statewide interests or areas are served. It should also document the need for the funds, the community support and expected results when applicable. Be sure to include the type and amount of services as well as the number of the specific target population that will be served (such as number of home health visits to X, # of elderly, # of school aged children to receive mentoring, # of violent crime victims to receive once a week counseling etc.)

This is a nationally recognized, National Guard educational program geared toward economically disadvantaged youth ages 13-17. The program serves an estimated 500 teens that are still in school but at risk of becoming dropouts. The program will be delivered at various locations across the state of FL as per the schedule & budget. The Program will operate on a schedule that supports a 3-week long summer session and 2 6-week long after-school sessions during the school year that align with the Florida public school 9-week marking periods. Paxen will coordinate with local schools, school districts & community partners to document eligibility and seek referrals. Upon completion of the interview & assessment, participants may be registered into the program & assigned applicable training materials & supplies. Paxen will submit monthly reports listing the names, Department of Education (DOE) number, residential addresses, email addresses, & telephone numbers of each registered participant/parent/guardian for the preceding month. In addition the reports shall include the recommended course schedule for each participant & the daily sign in sheets. The curriculum shall focus on core academic skills & life skills, necessary to successfully participate in & complete the assigned curriculum. The overall expected benefit was and is to increase student engagement in school & address dropout prevention by increasing student enrollment & completion of school by those who attend.

8. Provide the total cost of the project for FY 2016-17 from all sources of funding:

- Federal: 0
- State: 0 (Excluding the requested Total Amount in #4d, Column G)
- Local: 5,000
- Other: 0

9. Is this a multi-year project requiring funding from the state for more than one year?

Yes