

# 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: Strengthening Our Sons, Inc.
2. Date of Submission: 01/06/2016
3. House Member Sponsor(s): Bruce Antone

## 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? Yes
- 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	25,000	25,000	0	0	50,000	50,000

- 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: Tammie Holt
- b. Organization: Strengthening Our Sons, Inc.
- c. Email: tammie.holt@strengtheningoursons.org
- d. Phone #: (407)619-9597

6. Organization or Name of Entity Receiving Funds:

- a. Name: Strengthening Our Sons, Inc.
- b. County (County where funds are to be expended) Orange
- c. Service Area (Counties being served by the service(s) provided with funding) Orange

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.)

Strengthening Our Sons, Inc. is a community behavior health service that provides Intervention and Prevention services for male youths ages 9-19. Our mission is to equip boys with a network of services and resources that met their unique needs, while providing boys with a positive environment through our male led curriculum based leadership program that provides social, professional, and personal life skills with measurable impact that will enhance each male's quality of life.

Funding would be used to assist with operational cost for our Prevention services. Funds would help to conduct more Mentor and Volunteer trainings so the services are ongoing. Purchase more educational material where SOS can incorporate activities that involve STEM (science, technology, engineering and mathematics) for our youth. Also provide a variety of parent classes and creative workshops for single parents raising male youths with behavioral and academic problems.

Funding would also help SOS Prevention services and Male Youth Leadership program to expand its services into more Orange County Public Middle and High Schools. Funds would also help SOS to host an annual "All Male Youth Summit" for all Central Florida boys ages 9- 19. This summit would include informing and teaching boys about important issues affecting them today, such as Gang Violence & Interacting with Law Enforcement, Rape and Teen Dating Abuse, Leadership and Self-Esteem and How to Dress for Success. This summit will also include workshops for parents focusing on: 1) Ways to build healthy relationships and communicate with your son; 2) Signs that your son is in a gang; and 3) How to talk to your son about sex/what is rape. Strengthening Our Sons runs weekly school and community base programming aligned with Orange County public schools' year calendar. For the 2016-2017 year, our program will serve a minimum of 500 male youths and 100% of the funds requested will be applied for those purposes.

PROPOSED BUDGET:

\*Listed below is a proposed budget to operate the prevention services for approximately 500 youths and better serve Orange County, Florida.

SOS Intervention- Therapeutic Services

Personnel

Chief Executive Officer/Director \$60,000 Program Director manages entire program and supervises case managers. Salary is paid 100% from therapeutic services billed through Medicaid, and other Insurance.

Targeted Case Managers \$32,000 Case Management services paid 100% from billing through Medicaid for qualified clients.

Licensed Counselor \$80,000 (\$40,000 x 2) Salary is paid 100% from therapeutic services billed through Medicaid, and other Insurance.

Non-Personnel \*(Annual)

Office Space \$6,000 Rent paid 100% from SOS intervention side of program.

Supplies \$4,000 Paid 100% from SOS intervention.

Postage \$500 Paid 100% from SOS intervention.

Fax/Phone/Internet \$2,400 Paid 100% from SOS intervention.

General Liability Insurance \$354 Paid 100% from SOS intervention.

SOS Intervention Personnel/Non-Personnel Total \$185,254 All Salaries and Expenses for SOS Intervention are paid from therapeutic services billed through Medicaid, and other Insurance. No funds from Grants and Donations are used for SOS intervention.

SOS Prevention-Mentor

Programming

Office Supplies \$2,500 Pens, Paper, envelopes, Printer ink,

Marketing Materials \$5,000 Posters, Brochures, Flyers, Post-cards, Business Cards, Program banner, and Postage

Education Materials \$10,000 Software, workbooks, DVD's, books, folders, journals, awards, certificates, pencils, and paper for mentors and mentees.

STEM Curriculum and activities

Arts and Crafts \$8,000 Experiment Kits, paint, paintbrushes, crayons, construction paper, poster paper and boards, pens, and pencils, board games,

Activities and Trips \$15,000 Assist with hosting: All Male Youth Summit, Annual Meet and Greet, Awards Luncheon, Camping & Fishing Trip, Young

Eagles Aviation Course, Orlando Science Museum, Culinary Arts course, 1 College football game, 3- day Florida College tour, with Van/Bus Rental

Attire \$4,700 Dress Shirts (embroidered), Ties, Belts, Program T- shirts, backpacks

Food \$3,000 Snacks and Drinks for Mentoring Sessions

SOS Prevention/Mentor Programming Total

Total \$48,200

100% of Grants and Donated Funds to Strengthening Our Sons go to Mentor Programming.

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: 0

Other: 185,254

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

No